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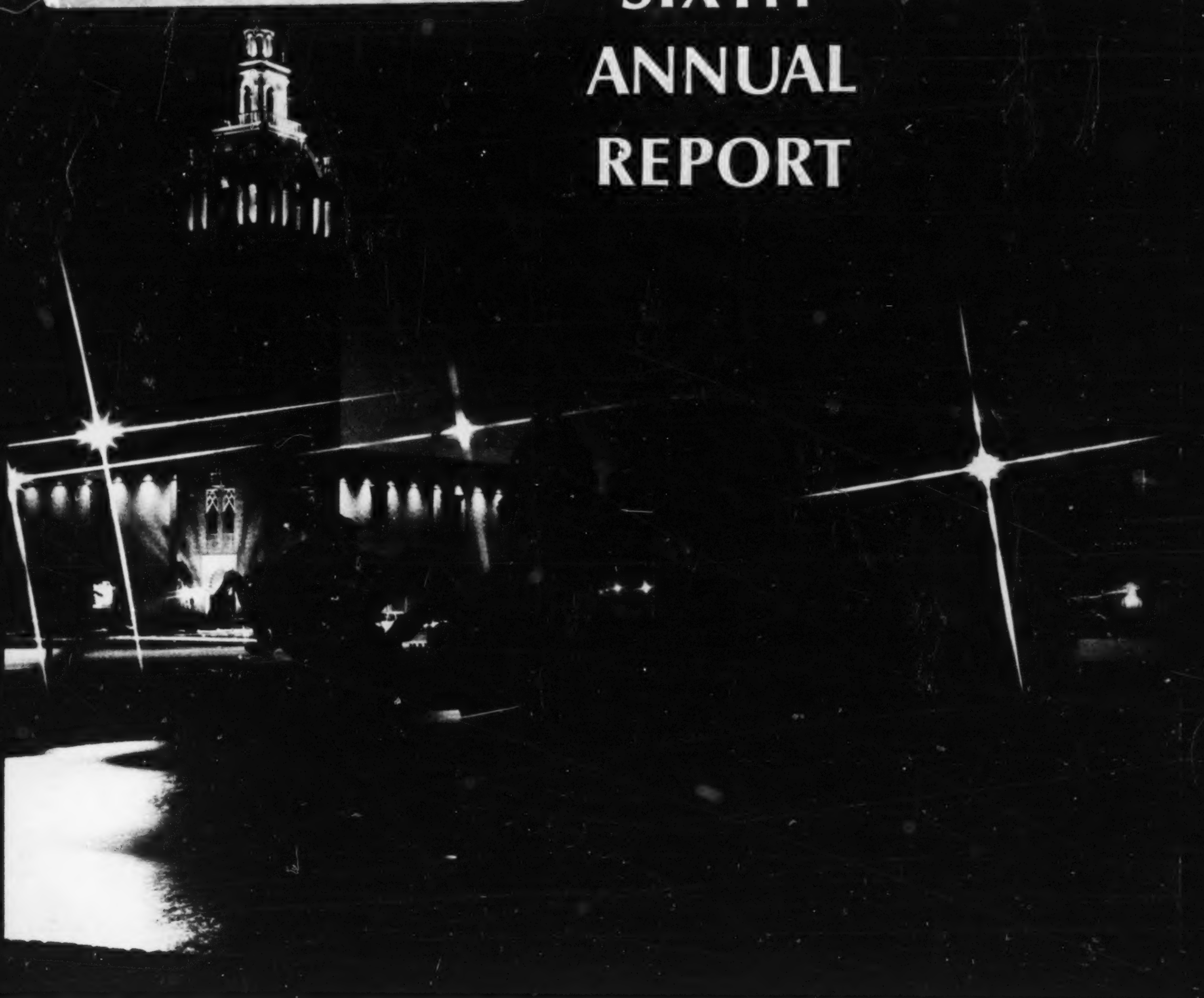
SIXTH ANNUAL REPORT



COUNTRY CLUB PLAZA, KANSAS CITY

photo by Walker, Missouri Tourism

FISCAL YEAR 1979-1980

MISSOURI

DIVISION OF FAMILY SERVICES
DEPARTMENT OF SOCIAL SERVICES

BEST AVAILABLE COPY

MISSOURI
DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES
P. O. BOX 88
JEFFERSON CITY
65103

CHRISTOPHER S. BOND
GOVERNOR

Honorable Christopher S. Bond
Governor of Missouri
State Capitol
Jefferson City, Missouri

Dear Governor Bond:

I am submitting the Sixth Annual Report of the Division of Family Services, covering the activities of the Division during the Fiscal Year, July 1, 1979-June 30, 1980.

Sincerely,

James R Moody

James R. Moody
Director

•• AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER ••
services provided on a nondiscriminatory basis

CHRISTOPHER S. BOND
Governor

DEPARTMENT OF SOCIAL SERVICES
Barrett A. Toan
Director

DIVISION OF FAMILY SERVICES
James R. Moody
Director

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Prepared by
Division of Planning and Budget
Research and Statistics
James Eastman, Director

PART I

REVIEW OF THE YEAR

Missouri's total welfare caseload decreased during Fiscal Year 1979-80. The average monthly number of recipients receiving cash benefits during the year was 240,618, a decrease of 2,646 persons (1.1 per cent) from the previous year. This marked the seventh time in seven years in which welfare caseload receiving cash benefits decreased. The average number of recipients, as indicated above decreased, also.

The welfare recipient count in Missouri as of June 1980 was 247,872, an increase of 11,479 (4.9 per cent) from June 1979. Aid to Families with Dependent Children (AFDC), Missouri's largest welfare program, increased 12,576 (6.7 per cent) to 200,383, General Relief (GR) increased 1,230 (27.3 per cent), Supplementary Security Income-Supplemental Payments (SSI-SP) decreased 3,699 (15.3 per cent), Supplemental Payments only (SP only) decreased 804 (9.8 per cent); Nursing Care (NC) increased 2,249 (27.0 per cent); Supplemental Aid to the Blind (ABS) decreased 39 (4.7 per cent); and Blind Pension increased 137 (37.7 per cent).

There was an increase in total expenditures between June 1979 and June 1980. During the 1979-80 Fiscal Year total cash assistance payments amounted to $204.1 million in state and federal exclusive of medical vendor payments and administrative costs. Compared with the preceding fiscal year this represented an increase of $20,496,342 (11.2 per cent). Of the total assistance payments, the largest expenditure was for AFDC totaling $153.8 million or 75.4 per cent of total costs, followed by NC whose expenditures totaled $29.3 million or 14.3 per cent of total costs. Costs for the remaining programs were as follows: SSI-SP, $7,924,746; SP Only, $4,415,300; GR, $4,109,576; ABS, $1.280,259; and BP, $879,680.

An increase of 18,496 or 16.7 per cent in the current fiscal year's applications occurred resulting in 128,939 total applications. AFDC received the most applications, 60,092, followed by MA with 45,323. GR received 14,813 applications, NC, 7,488, ABS, 871, and BP, 352.

Applications disposed of for the programs totaled 128,623 which was an increase of 21,104 (19.6 per cent) from the previous fiscal year. Of the total dispositions, 77,141 (60 per cent) were approvals and 51,482 (40 per cent) were rejections. In comparison with the previous fiscal year, the approval rate increased 2 per cent with a decrease of 2 per cent in the rejection rate. Among the programs, AFDC dispositions totaled 60,087 of which 36,235 (60.3 per cent) were approvals and 23,852 (39.7 per cent) were rejections, MA dispositions totaled 44,634 including 27,105 (60.7 per cent) approvals and 17,529 (39.3 per cent) rejections; dispositions for GR numbered 14,740 including 7,513 (51.0 per cent) approvals and 7,227 (49.0 per cent) rejections; NC dispositions totaled

7,936 with 5,832 approvals (73.5 per cent) and 2,104 rejections (26.5 per cent), ABS dispositions totaled 883 with 241 approvals (27.3 per cent) and 642 rejections (72.7 per cent), and BP dispositions totaled 343 with 215 approvals (62.7 per cent) and 128 rejections (37.3 per cent).

AVERAGE MONTHLY NUMBER OF RECIPIENTS OF PUBLIC ASSISTANCE, BY PROGRAM AND FISCAL YEAR, 1938-1980

Fiscal Year	OAA	AFDC		GR		PTD	AB	NC	ABS	SSI-SP	SP
		Families	Persons	Cases	Persons						
1938	73,378	1,778	4,743	47,189	157,577						
1939	73,606	7,718	18,805	35,718	106,941						
1940	80,955	10,225	24,172	26,715	75,310						
1941	106,378	12,707	29,965	24,515	68,404						
1942	115,724	14,221	32,717	16,009	43,781						
1943	112,165	13,295	30,881	10,832	25,930						
1944	105,757	11,330	27,583	6,857	14,632						
1945	101,745	10,827	27,373	7,963	19,488						
1946	102,093	12,605	33,074	8,550	21,238						
1947	109,752	17,398	45,574	10,946	27,885						
1948	115,491	20,287	52,642	11,680	27,924						
1949	120,354	22,200	56,961	14,152	33,941						
1950	128,422	25,215	63,443	16,659	39,032						
1951	132,295	25,102	62,185	13,610	32,862	5,630					
1952	131,997	22,707	56,625	9,629	25,080	10,323	2,411				
1953	130,902	20,901	52,513	8,770	23,772	12,312	2,886				
1954	132,504	20,374	52,156	5,631	12,586	13,971	3,190				
1955	133,135	21,498	55,577	5,751	10,825	14,262	3,539				
1956	131,194	20,745	54,668	5,999	9,673	13,390	4,107				
1957	127,666	20,290	54,933	6,654	9,875	13,889	4,668				
1958	124,576	22,855	68,339	6,674	9,641	14,786	4,785				
1959	121,184	25,309	85,854	7,570	10,114	15,257	4,864				
1960	117,435	26,202	90,371	8,308	10,653	15,460	4,845				
1961	114,207	26,162	91,155	8,643	11,176	15,415	4,715				
1962	111,120	26,667	94,412	8,990	11,481	15,217	4,606				
1963	107,201	26,369	95,005	9,146	11,547	14,855	4,492				
1964	104,347	25,925	94,983	9,260	11,623	14,604	4,344				
1965	102,122	26,137	97,598	9,711	12,129	14,986	4,178				
1966	99,493	26,053	98,495	9,568	11,804	15,527	3,986				
1967	96,644	26,043	99,046	9,306	11,412	16,081	3,797				
1968	93,699	26,937	102,464	9,582	11,731	16,886	3,640				
1969	90,926	29,390	109,036	10,108	12,085	17,646	3,587				
1970	92,457	35,532	126,890	10,978	12,986	18,240	3,680				
1971	94,516	47,992	164,318	11,504	12,817	20,114	3,728				
1972	94,116	60,644	197,265	12,732	14,086	21,986	3,829				
1973	91,402	67,667	212,077	13,103	14,406	23,083	3,901				
1974	89,196	75,166	232,847	12,516	13,519	24,713	3,856	4,065	93	49,480	22,176
1975		82,253	257,544	10,394	11,110			7,876	735	45,539	16,167
1976		87,532	270,937	8,784	9,446			8,065	995	39,469	13,336
1977		88,521	267,276	7,004	7,453			8,553	1,007	33,978	11,397
1978		72,425	213,693	4,734	4,989			8,429	868	29,192	9,840
1979		65,044	193,340	4,128	4,324			8,243	802	25,535	8,591
1980		65,398	192,577	4,928	5,181			9,933	790	21,929	7,740

In addition to cash assistance payments, a total of $288.7 million was expended for medical services under the Title XIX Medicaid program. This was an increase of $54,946,334 (23.5 per cent) over Fiscal Year 1978-79.

On October 1975, Title XX of the Social Security Act was implemented in the State of Missouri, as it was throughout the United States. Title XX provides funding for the provision of social services to the low in-

TOTAL EXPENDITURES FOR PUBLIC ASSISTANCE, BY PROGRAM, AND FISCAL YEAR 1938-1980

Fiscal Year	OAA	AFDC	GR	PTD	AB	NC	ABS	SSI-SP	SP
1938	12,407,623	342,126	5,430,577						
1939	16,151,567	2,380,524	4,810,694						
1940	17,037,284	2,707,655	3,856,881						
1941	21,221,407	4,132,952	3,791,235						
1942	18,104,257	3,950,547	2,764,492						
1943	23,890,278	4,927,905	2,176,355						
1944	26,878,738	4,394,982	1,841,408						
1945	27,868,325	4,325,823	2,239,578						
1946	32,030,620	5,377,414	2,271,776						
1947	43,773,933	7,247,857	3,689,517						
1948	48,367,344	9,770,235	3,839,362						
1949	59,336,897	13,848,585	5,344,683						
1950	66,627,001	16,023,757	6,403,771						
1951	69,118,200	15,714,967	5,171,714	2,378,006					
1952	69,282,883	14,222,932	3,526,972	5,741,225	1,078,821				
1953	77,034,015	14,658,219	3,571,655	7,456,502	1,761,390				
1954	79,608,808	15,922,557	2,384,007	8,707,148	2,105,070				
1955	79,420,974	17,360,112	2,705,460	8,885,736	2,335,630				
1956	78,220,706	17,051,415	3,118,375	8,361,923	2,918,880				
1957	81,849,555	19,318,849	3,998,203	9,306,784	3,361,260				
1958	81,495,992	23,794,310	4,142,584	10,019,843	3,445,260				
1959	81,053,332	26,156,515	5,874,885	10,543,468	3,599,115				
1960	83,068,603	28,507,672	6,151,620	11,311,297	3,779,360				
1961	81,963,485	27,912,058	6,350,232	11,481,705	3,677,635				
1962	79,258,672	29,794,349	7,318,387	11,304,733	3,592,810				
1963	79,567,118	29,917,907	6,721,724	11,480,742	3,637,010				
1964	80,196,615	29,835,215	7,445,476	11,739,412	3,835,736				
1965	78,773,629	30,556,796	7,807,689	12,168,215	3,759,825				
1966	79,734,067	31,449,727	7,724,156	13,091,000	3,758,043				
1967	81,197,534	32,394,367	7,652,289	14,053,457	3,645,440				
1968	79,159,737	33,305,844	7,716,287	15,026,646	3,682,830				
1969	78,815,269	38,651,363	7,876,469	15,463,287	3,714,851				
1970	84,478,099	48,601,131	9,129,746	16,945,965	3,963,653				
1971	86,204,380	64,544,254	9,541,025	18,591,620	4,071,334				
1972	85,624,951	78,748,819	10,119,529	20,091,304	4,524,659				
1973	89,424,484	84,705,621	11,091,726	23,597,794	4,838,788				
1974	44,617,046	101,659,101	10,469,550	12,871,627	2,519,846	2819,937	34,878	11060,121	9008,619
1975		118,930,671	8,365,649			17122,342	891,375	17883,478	10603,233
1976		136,241,804	7,159,310			17595,267	1231,753	14642,410	7621,464
1977		138,122,582	5,750,299			18927,290	1390,151	12185,667	6109,796
1978		140,276,364	3,861,274			18886,751	1185,080	10382,778	5319,213
1979		143,032,898	3,355,896			18668,908	1287,161	9247,275	4882,143
1980		153,791,997	4,109,576			29250,655	1280,259	7924,746	4415,300

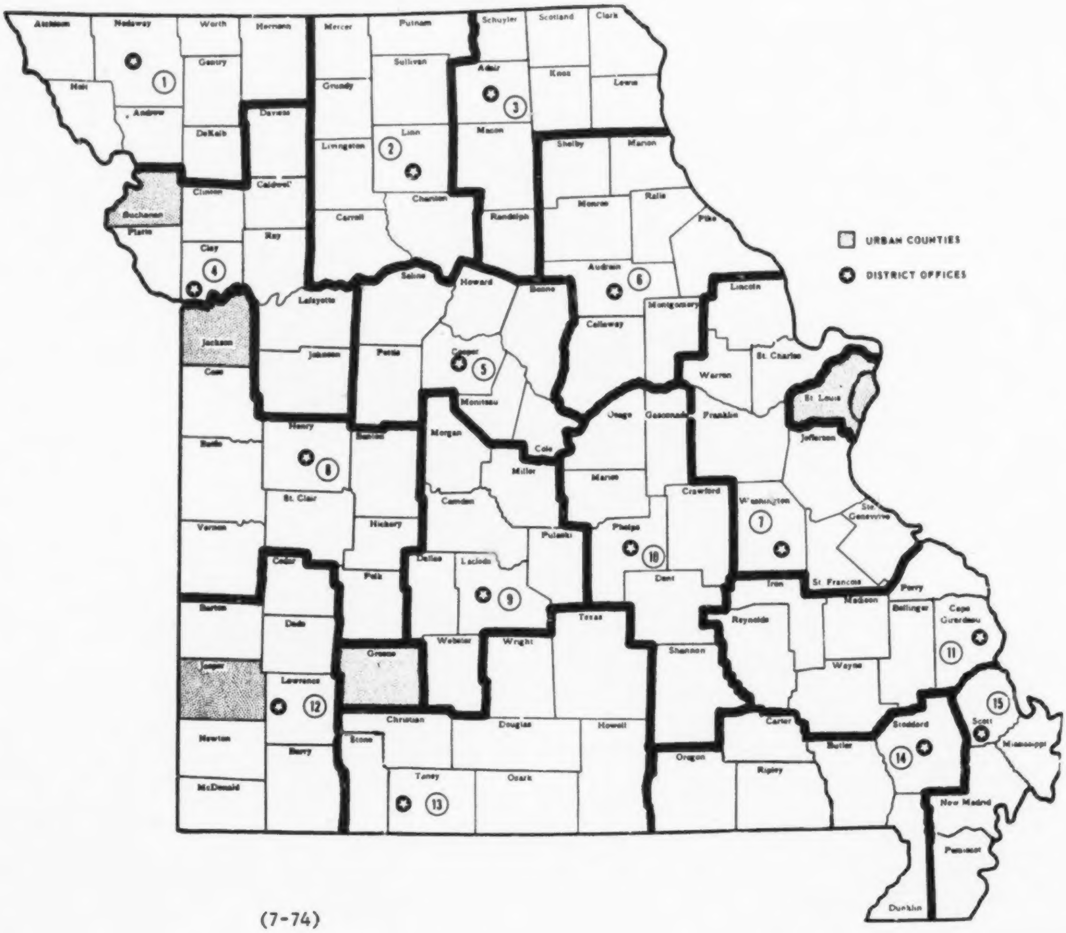
come families, including both public welfare and non-public welfare individuals. Some of the services provided under Title XX are adoptions, alcohol and drug abuse counseling, chore, day care, education services, employment services, family planning, foster care, home delivered and

AVERAGE MONTHLY PAYMENTS TO RECIPIENTS OF PUBLIC ASSISTANCE, BY PROGRAM AND FISCAL YEAR, 1938-1980

Fiscal Year	OAA	AFDC		GR		PTD	AB	NC	ABS	SSI-SP	SP
		Per Family	Per Person	Per Case	Per Person						
1938	14.09	32.07	12.02	9.59	2.87						
1939	18.28	25.70	10.55	11.22	3.75						
1940	17.53	22.07	9.33	12.03	4.27						
1941	16.62	27.10	11.49	12.89	4.62						
1942	13.04	23.15	10.06	14.39	5.26						
1943	17.75	30.89	13.30	16.74	6.99						
1944	21.18	32.33	13.28	22.38	10.49						
1945	22.83	33.30	13.17	23.43	9.57						
1946	26.14	35.55	13.55	22.14	8.91						
1947	33.24	34.72	13.25	28.09	11.03						
1948	34.90	40.13	15.47	27.39	11.46						
1949	41.08	51.98	20.26	31.47	13.12						
1950	43.23	52.96	21.05	32.03	13.67						
1951	43.54	52.17	21.06	31.67	13.11	46.93					
1952	43.74	52.20	20.93	30.52	11.72	46.35	50.00				
1953	49.04	58.44	23.26	33.94	12.52	50.60	50.00				
1954	50.07	65.13	25.44	35.28	15.78	51.94	55.00				
1955	49.71	67.29	26.03	39.20	20.83	51.92	55.00				
1956	49.69	68.50	25.99	43.32	26.86	52.04	60.00				
1957	53.43	79.34	29.31	50.07	33.74	55.84	60.00				
1958	54.52	86.76	29.02	51.73	35.81	56.47	60.00				
1959	55.74	86.12	25.39	64.67	48.41	57.59	60.00				
1960	58.95	90.67	26.29	61.70	48.12	60.97	65.00				
1961	59.81	88.91	25.52	61.23	47.35	62.07	65.00				
1962	59.44	93.11	26.30	67.84	53.12	61.91	65.00				
1963	61.85	94.55	26.24	61.24	48.51	64.40	70.00				
1964	64.05	95.90	26.18	67.00	53.38	66.99	75.00				
1965	64.28	97.43	26.09	67.00	53.64	67.66	75.00				
1966	66.78	100.60	26.61	67.27	54.53	70.26	80.00				
1967	70.01	103.66	27.26	68.53	55.88	72.83	80.00				
1968	70.40	103.04	27.09	67.11	54.81	74.16	84.31				
1969	72.23	109.59	29.54	64.94	54.31	73.88	86.30				
1970	76.14	113.98	31.92	69.30	58.59	77.42	89.76				
1971	76.01	112.07	32.73	69.11	62.03	77.03	91.01				
1972	75.82	108.21	33.27	66.23	59.87	76.15	98.47				
1973	81.53	104.32	33.28	70.54	64.16	85.19	103.37				
1974	83.37	112.71	36.38	69.71	64.54	86.81	108.91	173.43	93.76	37.25	67.71
1975		120.49	38.48	67.07	62.75			181.17	101.06	32.73	54.65
1976		129.71	41.90	67.92	63.16			181.81	103.16	30.92	47.62
1977		130.03	43.06	68.42	64.30			184.41	115.04	29.89	44.67
1978		161.40	54.70	67.97	64.50			186.72	113.77	29.64	45.05
1979		183.25	61.65	67.75	64.68			188.73	133.74	30.18	47.36
1980		195.97	66.55	69.49	66.10			245.40	135.05	30.12	47.54

congregate meals, information and referral, legal assistance, and transportation. The specifics of this program are discussed in greater detail in Part V of the Annual Report, under the Social Services Section.

MISSOURI
DIVISION OF FAMILY SERVICES
ADMINISTRATIVE DISTRICTS


URBAN COUNTIES
DISTRICT OFFICES
Atchison
Nodaway
Worth
Harrison
Mercer
Putnam
Schuyler
Scotland
Clark
Holt
Andrew
Gentry
DeKalb
Daviess
Grundy
Sullivan
Adair
Knox
Lewis
Livingston
Linn
Macon
Shelby
Marion
Buchanan
Platte
Clinton
Caldwell
Ray
Carroll
Chariton
Randolph
Monroe
Ralls
Pike
Clay
Audrain
Lincoln
Lafayette
Saline
Howard
Boone
Montgomery
Callaway
Jackson
Johnson
Pettis
Cooper
Moniteau
Warren
St. Charles
St. Louis
Cass
Henry
Benton
Morgan
Cole
Osage
Gasconade
Franklin
Jefferson
Bates
Miller
Maries
St. Clair
Camden
Crawford
Washington
Ste. Genevieve
Vernon
Hickory
Pulaski
Phelps
Cedar
Polk
Dallas
Laclede
Dent
Iron
St. Francois
Perry
Barton
Dade
Webster
Wright
Texas
Reynolds
Madison
Bollinger
Cape Girardeau
Greene
Shannon
Wayne
Jasper
Lawrence
Scott
Newton
Christian
Douglas
Howell
Carter
Stoddard
Stone
Barry
Oregon
Butler
Mississippi
McDonald
Taney
Ozark
Ripley
New Madrid
Pemiscot
Dunklin
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(7-74)

ADMINISTRATIVE STAFF

Between the end of June 1979 and the end of June 1980, an increase of 119 persons or 2.2 per cent took place in the number of persons employed by the Division of Family Services. A total of 5,565 persons were employed by the Division of Family Services in June 1980 as compared with 5,446 persons in June 1979. The distribution of employees within the field offices as of June 1980 was as follows: 115 county directors, 253 income maintenance supervisors, 1,627 income maintenance caseworkers, 964 social service workers and caseworkers, 216 social service supervisors, 1,065 clerical staff and support workers, 107 workers in the blind district offices, 172 child support enforcement personnel, and 168 other professional caseworkers and labor and trade employees. State Office personnel totaled 492.

Table 1. Number of Employees of the Division of Family Services, Replacements and Separations, July 1979-June 1980

Month	Number of Employees at Beginning of Month	Number of Replacements or Additions	Number of Separations	Number of Employees at End of Month
TOTAL	XXXX	1,381	1,262	XXXX
1980				
June	5,515	188	138	5,565
May	5,443	159	87	5,515
April	5,330	203	90	5,443
March	5,380	81	131	5,330
February	5,389	81	90	5,380
January	5,279	186	76	5,389
1979				
December	5,269	93	83	5,279
November	5,274	76	81	5,269
October	5,294	60	80	5,274
September	5,347	48	101	5,294
August	5,478	67	198	5,347
July	5,446	139	107	5,478

In Fiscal Year 1980, the total staff additions was 1,381, compared with 1,262 separations, resulting in 119 more additions than separations. The preceding fiscal year had 89 more separations than additions.

PART II

LEGISLATIVE DEVELOPMENTS

The Second Regular Session of the 80th General Assembly which convened on January 9, and adjourned on April 30, 1980, enacted the following legislation affecting the Division of Family Services:

S.B. 574 - Amended the child abuse and neglect law to change the standard for reporting from "reasonable cause to believe" to "reasonable cause to suspect", mandated the turning over to the Division by mandated reporters evidence of sexual abuse or sexual molestation of any child under 18 years of age; provided that any legally recognized privileged communication, except that between attorney and client, shall not apply to situations involving known or suspected child abuse or neglect and shall not constitute grounds for failure to report as required or permitted by statute, to cooperate with the Division in any of its activities as required by statute, or to give or accept evidence in any judicial proceeding relating to child abuse or neglect; mandated that confidential information shall be made available to interdisciplinary teams which are formed to assist the Division in investigation, evaluation, and treatment of child abuse and neglect cases, as well as to the parent of a child who is the subject of a report, except that the names of reporters shall not be furnished either to the subject of the report or to the parent or guardian of such person; mandated the maintenance of a central registry capable of receiving and monitoring reports received pursuant to law "in a manner that facilitates rapid access and recall of the information reported, and of subsequent investigations and other relevant information". The bill was approved by the Governor on June 20, and goes into effect on August 13, 1980.

SCS for S.B. 588 - Provided that an indigent woman pregnant with a first child shall be eligible to receive medical assistance if she would be eligible otherwise for aid to families with dependent children benefits, and included surgical procedures under certain conditions as a service to persons eligible to receive medical assistance. The bill was approved by the Governor on June 17, and goes into effect on August 13, 1980.

CCS for HCS for H.B.s 1177, 1570 and 1589 - Amended the utilicare law to expand the eligible population to include the blind and disabled in addition to the elderly (persons 65 years of age); defined "disabled" as persons receiving social security disability benefits, supplemental security income benefits based on blindness or disability, or receiving state blind pensions, state aid to the blind, or state supplemental aid to the blind; included payments to renters in an amount not to exceed 8 percent of the annual rent or $100, whichever is less; provided general revenue subsidies of home heating costs of persons eligible for both state and federal programs up to the state maximum of $150, if the benefit level available under the federal program is less than the maximum benefit level of the state program (thus precluding persons from receiving maximum benefits available under both programs and requiring coordination of benefits); and assigned coordination responsibility of all federal and state heating assistance programs to the Department of Social Services, with the option to contract with local community action agencies for administration of the program. Income eligibility remained at $7,500 with no change in monthly or total payment maximums and in months covered. The bill was approved by the Governor on June 17, and goes into effect on August 13, 1980.

H.B. 1290 - Increased the monthly general relief maximum from $70 to $100. The bill was approved by the Governor on June 20, 1980, and goes into effect on January 1, 1981.

H.B. 1613 - Increased the blind pension monthly payment from $160 to $175. The bill was approved by the Governor on June 17, and goes into effect on August 13, 1980.

CCS for H.B. 1009 - This bill appropriated funds to the Division of Family Services for the Fiscal Year 1980-81 as given in table on page 13.

DIVISION OF FAMILY SERVICES
APPROPRIATIONS FOR THE 1980-81 FISCAL YEAR
SECOND REGULAR SESSION, 80th GENERAL ASSEMPLY

	Total	State	Federal
TOTAL	656,489,804	286,020,333	363,107,302
Income Maintenance: (Total)	253,013,838	134,921,269	118,092,569
Assistance Programs--			
Aid to Families with Dependent Children	169,772,245	68,238,099	101,534,146
Blind Pensions	934,633	934,633	
Adult Supplementation	10,000,000	10,000,000	
Blind Supplementation	3,072,000	3,072,000	
General Relief	4,187,993	4,187,993	
Nursing Care	32,500,000	32,500,000	
Indo-Chinese Refugee Assistance	900,000		900,000
Emergency Assistance to Families with Children	600,000	300,000	300,000
Administration	30,876,967	15,614,144	15,262,823
AFDC Monthly Income Reporting System	170,000	74,400	95,600
Social Services: (Total)	65,761,157	16,329,393	42,985,961
Vendor Programs--			
Homeless, Dependent and Neglected Children	6,336,589	5,062,070	1,274,519
Child Abuse and Neglect Multi-Disciplinary Treatment	1,030,000	230,000	800,000
Purchase of Day Care	6,734,713	2,377,643	4,357,070
AFDC Working Training	601,420	601,420	
Purchase of Service Expenditures to Organizations	22,377,476*		16,783,107
Title XX Vendor Training	1,000,000*		750,000
Residential Treatment of Homeless, Dependent and Neglected Children	4,886,960	1,429,205	3,457,755
Administration	22,793,999*	6,629,055	15,563,510
Medical Services: (Total)	302,017,866	124,084,372	177,174,086
Vendor Payments--			
Medical Assistance - Title XIX	180,691,579	76,613,229	104,078,350
SNF/ICF -Title XIX	117,200,000	46,594,034	70,605,966
Community Placement of Mentally Retarded in ICF-Title XIX	1,898,520***		1,139,112
Administration	2,227,767	877,109	1,350,658
Services for the Blind: (Total)	3,818,197	1,132,724	2,685,473
Services for the Visually Impaired (Vendor Payments)	2,142,260	554,297	1,587,963
Administration	1,675,937	578,427	1,097,510
Title IV-D Child Support Enforcement: (Total)	10,875,656	791,030	10,084,626
Reimbursements--			
Reimbursements to Counties	5,000,000		5,000,000
Federal Reimbursement and Local Incentives	2,711,605		2,711,605
Administration	3,164,051	791,030	2,373,021
Administrative Services:			
Administration	21,003,090**	8,761,545	12,084,587

*Includes $5,594,369 Donated Funds, $250,000 Local Funds, and $601,434 Donated Funds, respectively.

**Includes $156,958 Donated Funds.

***Includes $759,408 Payments by Department of Mental Health.

PART III

REVIEW OF PUBLIC ASSISTANCE PROGRAMS

AID TO FAMILIES WITH DEPENDENT CHILDREN - REGULAR

Aid to Families with Dependent Children is a federal-state money payment program and includes money payments to meet the needs of the parents or needy relatives with whom the child is living and the needs of any other individual living in the same home who is considered essential to the well-being of the child, providing the resources and the needs of such an individual are taken into account in determining the amount of money payment. A dependent child is a needy child who has been deprived of parental support or care by reason of the death, continued absence from the home, or physical or mental incapacity of a parent or who is deprived of such support or care because the father is unemployed. The needy child must be living in a place of residence maintained by one or more relatives as his own home. The child must be under age 18 or 18 years of age but under 21 and a student regularly attending a school, college, university, or a course of vocational or technical training designed to fit the child for gainful employment. A child recipient includes the unborn child when pregnancy has been medically determined. The AFDC family or assistance group consists of the dependent children, the adult recipients in the home, and any other individual living in the same home who is considered essential to the well-being of the child. The retained objective of the AFDC program, which was started in 1938, is to provide assistance to children in their own homes who became dependent through no fault of their own. Its basic philosophy is focused on keeping families intact and thereby permitting children to obtain the benefits associated with normal family life.

Prior to July 1977, maximum benefits were fixed by law at $56 for the first child, $44 for the eligible adult relative, and $35 for each additional child. At that time, the maximum payment was changed to a fixed percentage of need standard assigned a given assistance group size. Each family's monthly full standard of need is figured, and the percentage of need deducted to arrive at the actual monthly payment standard. The outcome of these changes increases the payments to families with little or no income and reduces payments or closes cases of families who have incomes. The percentage of need for Fiscal Year 1979-80 was 74 per cent compared to 70 per cent in Fiscal Year 1978-79.

AID TO FAMILIES WITH DEPENDENT CHILDREN - PAYMENTS

As is illustrated in Table 2, there was an insignificant growth in the July caseload which differs from last year's caseload reductions. There were 110 more families and 33 more persons receiving AFDC than in June. This was 0.2 per cent in families and less than one tenth of one per cent increase in persons.

Table 2. Number of Recipients and Amount of Payments for Aid to Families with Dependent Children, July 1979-June 1980*

Month	Recipients			Amount of Payments		
	Families	Children	Persons	Total	Average	
					Per Family	Per Person
TOTAL	XXXX	XXXX	XXXX	153,791,997**	XXXX	XXXX
1980						
June	68,376	135,110	200,383	13,457,322	196.81	67.16
May	67,368	133,502	197,579	13,214,968	196.16	66.88
April	67,020	133,237	196,989	13,170,530	196.52	66.86
March	67,189	133,559	197,474	13,182,987	196.21	66.76
February	66,097	131,814	194,462	12,934,801	195.69	66.52
January	65,658	131,174	193,211	12,819,354	195.24	66.35
1979						
December	64,251	128,653	189,025	12,528,284	194.99	66.28
November	63,887	128,294	188,216	12,477,622	195.31	66.29
October	64,125	129,024	189,159	12,535,893	195.49	66.27
September	63,643	128,482	188,064	12,438,034	195.43	66.14
August	63,661	128,852	188,406	12,452,265	195.60	66.09
July	63,375	128,696	187,840	12,579,937	198.50	66.97

* For data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

** Does not include retroactive and deficiency payments and AFDC-FC data but does include AFDC-UF data.

There was a $10.8 million (7.5 per cent) increase in total expenditures over and above the previous year. Last year's June payment per person of $61.79 was $5.37 less than this June's payment of $67.16. The month of June's average family payment increased $13.37 over the previous June's average, increasing to $196.81 per family. Average monthly costs were $12.8 million compared with $11.9 million throughout the prior year.

AID TO FAMILIES WITH DEPENDENT CHILDREN - APPLICATIONS

One of the factors influencing caseload trends is application activity, especially by the number of applications received and disposed of, 60,092 and 60,087 respectively. The applications received during the month of December were the lowest for year, this being consistent with the prior fiscal year. However, the highest number of applications occurred in January of this year versus August of last year. These statistics are displayed in graph 3A. There was a slight increase in the average monthly number of applications during the year. In Fiscal Year 1979-80 there were 5,008 applications compared with last year's 4,373. Regarding those applications that were disposed of, an increase of 16.7 per cent occurred during Fiscal Year 1979-80. Only 60.3 per cent of the

dispositions were found to be eligible, and 39.7 per cent of the applications were denied due to such reasons as change of residence, voluntary withdrawal, or another form of assistance considered to be more appropriate. This is consistent with the previous year. Pending applications at the close of the fiscal year totaled 3,193, an increase of 55 or 1.8 per cent from the prior year. These data and other application totals appear in Table 3. The monthly differences which are the approved minus the closed cases, peak in January, the mid fiscal year point.

Table 3. Applications for Aid to Families with Dependent Children Received, Disposed of, and Awaiting Disposition at End of Month, July 1979-June 1980*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month⌿
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	60,092	60,087	36,235	23,852	XXXX
1980					
June	5,444	5,346	3,468	1,878	3,193
May	5,094	4,599	2,942	1,657	3,094
April	4,908	4,808	2,957	1,851	2,597
March	4,781	5,072	3,201	1,871	2,495
February	4,719	4,930	2,983	1,947	2,782
January	6,248	6,209	3,690	2,519	2,990
1979					
December	3,955	4,726	2,762	1,964	2,949
November	5,025	4,996	2,975	2,021	3,713
October	5,256	5,442	3,061	2,381	3,677
September	4,607	4,290	2,436	1,854	3,859
August	5,702	5,371	3,125	2,246	3,539
July	4,353	4,298	2,635	1,663	3,198

* For monthly data prior to July 1979, see Annual Report for Division of Family Services, 1978-79, p. 16.

** Includes such reasons as change of residence, voluntary withdrawal and another form of assistance considered more appropriate (see Table 5).

⌿ Figure does not always agree with number carried over as pending at first of following month because of adjustments in previous figures.

AID TO FAMILIES WITH DEPENDENT CHILDREN - CASE OPENINGS

Listed in Table 4 are reasons for opening cases for Aid to Families with Dependent Children. There were 36,235 AFDC cases opened in Fiscal Year 1980. The most predominant reason for case openings was the category of desertion, separation, or divorce of parents, accounting for 28,511 or 78.7 per cent. Loss of employment benefits to persons in the home as a result of illness, disablement, lay-off, discharge, or other reasons accounted for 13.1 per cent or 4,752 of all openings. Only 100 cases were opened because of exhausted resources.

Table 4. Cases Opened for Aid to Families with Dependent Children by Reason for Opening, July 1979-June 1980

Reason for Opening	Number	Per Cent
TOTAL	36,235	100.0
Change in economic circumstances because of:	35,312	97.5
Loss of employment benefits to persons in home		
Illness or disablement	1,936	5.3
Lay-off, discharge, or other reason	2,816	7.8
Resources exhausted	100	0.3
Desertion, separation or divorce of parents	28,511	78.7
Parent or parents institutionalized or incarcerated	425	1.2
Loss of wage earner in home by death	530	1.5
Loss or reduction of income from outside the home	527	1.4
Other loss of income	467	1.3
No material change in economic circumstances:	923	2.5
Transfer from other assistance	116	0.3
Other	807	2.2

AID TO FAMILIES WITH DEPENDENT CHILDREN - APPLICATIONS REJECTED

Table 5 provides the reasons for rejections of AFDC applications. Those applicants ineligible because of sufficient income or resources constituted 39.9 per cent or 9,511 of the 23,852 total rejections. Slightly over one-third of the rejections are for reasons other than points of eligibility including voluntary withdrawal of applications, moving out of state or otherwise causing whereabouts to be unknown, and various other reasons. One-fourth of the applicants are rejected for reasons other than insufficient need. Such reasons include the child not being deprived of parental support, failure to furnish necessary information or comply with agency policy, child not living with specified relative, or unable to meet disability requirements. All percentages of reasons for having rejected applications are within five per cent of agreement as compared to last year's total per cents.

Table 5. Applications Rejected for Aid to Families with Dependent Children, by Reason for Rejection, July 1979-June 1980

Reason for Rejection	Number	Per Cent
All Applications Rejected	23,852	100.0
Ineligible because of sufficient income or resources	9,511	39.9
Available resources of applicant	9,443	39.6
Receipt of Veterans Benefits, employer pension, or other public assistance	33	0.1
Other resources or not classified by specific source of income	35	0.2
Ineligible for reasons other than insufficient need	6,118	25.6
Child not deprived of parental support	1,490	6.2
Failure to furnish necessary information or comply with agency policy	4,111	17.2
Unable to meet disability requirement	141	0.6
Child not living with specified relative	376	1.6
Rejected for reasons other than points of eligibility given above	8,223	34.5
Voluntarily withdrew application	5,067	21.3
Moved out of state or could not be located	1,078	4.5
All other reasons	2,078	8.7

AID TO FAMILIES WITH DEPENDENT CHILDREN - CASES CLOSED

Table 6 identifies the 31,340 closed cases by the reasons for closing the cases. Voluntary requests of discontinuance, 22.1 per cent, make up the largest percentage of reasons for closing cases. All other reasons for loss of eligibility which include the parent no longer being incapacitated, refusal after acceptance to comply with agency policy, and refusal to give necessary information, occur second in frequency, 20.2 per cent or 6,344 closings. An additional 6,027 or 19.3 per cent resulted from obtainment of employment or increased earnings by payee or others in the household, or other economic reasons which consist of the following circumstances; resources other than earnings of parents or other persons in home, and cases where children were not deprived of parental support for reasons not otherwise classified. The category of children attaining maximum age occurred in only 50 of the cases. Monthly Status Reporting, the principle of which is to promote accurate reporting AFDC eligibility factors through the process of monthly income reporting by the clientele is responsible for a small portion of the case closings. Although Monthly Status Reporting did not exist on a statewide basis until August 1980, it was implemented on a trial basis in Jackson County the last six months of the fiscal year. Therefore, any closings as a result of Monthly Income Reporting took place in Jackson County only. The majority of the ramifications of Monthly Status Reporting remains to be seen in the following fiscal year.

Table 6. Number of Aid to Families with Dependent Children Cases Closed, by Reason for Closing, July 1979-June 1980

Reason for Closing	Number	Per Cent
All cases closed	31,340	100.0
Decreased need:		
Obtainment of employment or increased earnings by payee or others in household and other economic reasons*	6,027	19.3
Receipt of OASDHI or other Federal or State Benefits or Pensions	2,145	6.8
Receipt of or increase in Child Support from absent parent	733	2.3
Loss of eligibility other than decreased need:		
Child attained maximum age	50	0.2
Moved out of state or could not be located	5,303	16.9
Voluntary request of discontinuance	6,918	22.1
All other reasons for loss of eligibility**	6,344	20.2
All other reasons †	3,820	12.2

* Includes resources other than earnings of parents or other persons in home, and cases where children were not deprived of parental support for reasons not otherwise classified.

** Includes such reasons as parent no longer incapacitated, refusal after acceptance to comply with agency policy, and refusal to give necessary information.

† Child admitted to child-caring agency or institution, death of dependent child, no longer an eligible child in the home, transferred to other assistance, change in payee and change in law or agency policy.

AID TO FAMILIES WITH DEPENDENT CHILDREN CHARACTERISTICS STUDY

The Division of Family Services conducts an Aid to Families with Dependent Children Characteristics Study every two years. The sample, which was taken from households that received assistance during March 1979, was designed to support valid conclusions in reference to Aid to Families with Dependent Children. Many of the socio-economic characteristics of recipients are discussed below.

Nearly one-half (44.0 per cent) of AFDC families are white, 55.8 per cent are black, and 0.2 per cent are Asian or Pacific Islanders. The average number of children per AFDC family is 2.7.

There were 64,276 AFDC recipients during the study month in question, of which 66.4 per cent received AFDC for over one year. The average length of time on assistance was 3.6 years. However, the median length of time on assistance was 1.2 years and the mode for length of time on assistance was 0.8 years.

The reason for dependency in 91.4 per cent of the cases is due not to death of the father, but rather to the absence of the father from the home, the most common reason being father never having married mother, divorce, or desertion. In 1938, the beginning of the AFDC program, the absence of the father from the home for reasons other than death accounted for 52 per cent of the cases and has been increasing each year. Only 0.9 per cent of the reasons for dependency were related to being deprived of the mother's support. Only 7.5 per cent of the recipients were eligible for assistance due to circumstances directly concerning the father, such as his being deceased, physically or mentally incapacitated, or unemployed. Note that reasons for dependency differ somewhat from reasons for opening cases in that reasons for children's dependency include either the father supplying support or care for the children or the father being deceased, incapacitated, unemployed, or absent from the home. Reasons for opening cases involve economic circumstances, marital status of parents, institutionalization of parents, or transfers from other types of assistance.

The distribution of AFDC children's ages shows that 37.4 per cent are less than age 6, 42.7 per cent are age 6 but less than age 14, and 19.9 per cent are aged 14 through 21.

The 1979 study revealed that 17.3 per cent of AFDC mothers work full time and 7.2 per cent work part time. Those mothers who were unemployed due to physical or mental incapacitation, being needed in the home as a homemaker, attending school or receiving training accounted for 38.0 per cent. Unemployed mothers who were awaiting recall from layoff and who were seeking work, whether actively or inactively, comprised 33.0 per cent of the AFDC mother population. The average monthly net income of the AFDC recipient, which includes only non-assistance income with the exception of earnings from public service employment (WIN), is $363 for working mothers and $18 for working fathers. One mother received as little as $25-$49 and one as much as $800. More than three quarters of all AFDC families had no net income at all.

AID TO FAMILIES WITH DEPENDENT CHILDREN - UNEMPLOYED FATHERS PROGRAM

Missouri is one of 27 states which has an Aid to Families with Dependent Children-Unemployed Fathers program. Although Missouri has had two varying Unemployed Fathers programs in the past, on July 15, 1975 the Seventy-eighth General Assembly proclaimed that not only adoptive parents in the home be included in the program but in addition, natural fathers be counted as eligible payees.

As indicated in Table 7, a total of $3,047,885 was paid via the Unemployed Fathers program during Fiscal Year 1979-80. Between July 1979 and June 1980, the number of families receiving AFDC benefits nearly tripled. The number of families at the end of the previous fiscal year was nearly one and one-half times as large as the number of families at the beginning of the fiscal year. The average payment per person this fiscal year ranged from $57.74 to $60.93, and the average payment per family varied between $261.35 and $273.29.

Table 7. Number of Recipients and Amount of Payments for Aid to Families with Dependent Children-Unemployed Fathers, July 1979-June 1980*

Month	Recipients			Amount of Payments		
	Families	Children	Persons	Total	Average	
					Per Family	Per Person
TOTAL	XXXX	XXXX	XXXX	3,047,885	XXXX	XXXX
1980						
June	1,530	3,568	6,628	403,867	263.97	60.93
May	1,354	3,199	5,907	353,869	261.35	59.91
April	1,324	3,208	5,856	350,330	264.60	59.82
March	1,293	3,123	5,709	342,102	264.58	59.92
February	1,142	2,769	5,053	302,187	264.61	59.80
January	992	2,467	4,451	262,010	264.12	58.87
1979						
December	772	1,955	3,499	206,825	267.91	59.11
November	682	1,750	3,114	183,355	268.85	58.88
October	657	1,701	3,015	176,275	268.30	58.47
September	614	1,600	2,828	164,997	268.72	58.34
August	576	1,538	2,690	155,310	269.64	57.74
July	537	1,439	2,513	146,758	273.29	58.40

* This data is included in Table 2.

AID TO FAMILIES WITH DEPENDENT CHILDREN - FOSTER CARE PROGRAM

Under provisions of the Seventy-second General Assembly which provides for continued AFDC benefits to certain neglected and/or abused children who are removed from their parents' or relatives' custody, the Juvenile Courts are authorized to place children needing foster care in the custody of the Division of Family Services.

In order to be eligible for being placed in foster family homes or non-profit child-caring institutions, children must have either received AFDC benefits during the month in which such court proceedings were started, or else if application for assistance had been made, would have received AFDC benefits for the month in question. Children who have been living with eligible AFDC parents or relatives within six months prior to the month in which proceedings were started, provided the eligible parent or relative had made application for AFDC, are eligible to receive AFDC-Foster Care.

In order that the child be returned to his natural home as quickly as possible, extensive efforts are made to improve conditions in his home during his absence.

Table 8 displays the amount of payments for AFDC-Foster Care recipients, the total annual payment being $2,419,310. The number of children receiving such benefits averaged 2,047 per month compared to 2,123 children in Fiscal Year 1978-79, a decrease of 76 or 3.6 per cent. An average of $201,609 per month was expended for the current fiscal year. The average payment per child varied only between $98.11 and $98.97.

Table 8. Number of Children and Amount of Payments for Aid to Families with Dependent Children-Foster Care, July 1979-June 1980

Month	Number of Children	Amount of Payments	Average Per Child
TOTAL	XXXX	2,419,310	XXXX
1980			
June	2,032	200,739	98.79
May	2,025	199,946	98.74
April	2,008	198,206	98.71
March	1,993	196,135	98.41
February	1,970	194,506	98.73
January	2,013	197,496	98.11
1979			
December	2,004	197,284	98.45
November	2,024	199,179	98.41
October	2,054	201,894	98.29
September	2,093	205,762	98.31
August	2,164	212,601	98.24
July	2,178	215,562	98.97

GENERAL RELIEF

General Relief, which provides assistance to needy, unemployed persons, is financed entirely through state funds. In that this type of assistance is primarily for the benefit of physically or mentally incapacitated and unable-to-work persons, single employable persons or families with employable members are ineligible. The maximum payment under this program is set at $70 per month.

Table 9. Number of Recipients and Amount of Assistance for General Relief, July 1979-June 1980*

Month	Recipients				Amount of Assistance		
	Number of Persons in Cases	Number of Cases			Total	Average	
		Total	Family	Single Person		Per Person in Case	Per Case
TOTAL	XXXX	XXXX	XXXX	XXXX	4,109,576	XXXX	XXXX
1980							
June	5,743	5,479	198	5,281	383,453	66.77	69.99
May	5,668	5,421	192	5,229	377,682	66.63	69.67
April	5,381	5,164	174	4,990	358,806	66.68	69.48
March	5,479	5,220	180	5,040	364,632	66.55	69.85
February	5,285	5,050	166	4,884	351,555	66.52	69.61
January	5,283	5,054	172	4,882	350,892	66.42	69.43
1979							
December	5,036	4,834	172	4,662	333,190	66.16	68.93
November	4,956	4,756	175	4,581	327,934	66.17	68.95
October	4,835	4,634	174	4,460	319,889	66.16	69.03
September	4,837	4,598	183	4,415	317,508	65.64	69.05
August	4,746	4,511	180	4,331	312,297	65.80	69.23
July	4,784	4,384	232	4,152	311,738	65.16	71.11

* For Data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

In Fiscal Year 1979-80, the General Relief caseload showed an increase, whereas last year a decrease was evident. In this Fiscal Year's month of June alone, 1,230 or 27.3 per cent more persons received assistance than in the prior June. The average 1979-80 caseload was 5,169 persons which was an 845 person per month increase or an increase of 19.5 per cent from the prior year.

Payments totaled $4,109,576, an increase of 753,680 (22.5 per cent) from the previous year. Average payments per person of $66.77 in June 1980 represented an increase of $1.73 per person over June 1979. The average June payment per case is $3.22 more than the average payment per person.

Applications received and applications disposed of in Fiscal Year 1979-80 increased 22.7 per cent and 27.1 per cent respectively from the previous year. The 1,121 awaiting disposition represent a 6.9 per cent increase in the percentage of applications awaiting disposition at the end of June 1980 as compared with June 1979. These and similar data are displayed in Table 10.

Table 10. Applications for General Relief Received, Disposed of, and Awaiting Disposition at End of Month, July 1979-June 1980

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month*
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons	
TOTAL	14,813	14,740	7,513	7,227	XXXX
1980					
June	1,295	1,345	731	614	1,121
May	1,283	1,120	591	529	1,171
April	1,305	1,246	641	605	1,008
March	1,274	1,296	657	639	949
February	1,141	1,116	548	568	971
January	1,369	1,359	696	663	946
1979					
December	1,001	1,065	566	499	936
November	1,188	1,190	578	612	1,000
October	1,334	1,388	622	766	1,002
September	1,067	1,074	537	537	1,057
August	1,460	1,383	738	645	1,064
July	1,096	1,158	608	550	987

* Figure does not always agree with number carried over as pending at first of following month because of adjustments in previous figures.

Change in economic circumstances accounted for 89.8 per cent of the openings for General Relief for the year, as Table 11 illustrates. These circumstances in descending order are: illness or disablement causing loss of employment benefits to persons in the home, resources exhausted, lay-off, discharge, or other reason causing loss of employment benefits to persons in the home, loss or reduction of income from outside the home, miscellaneous losses of income, and loss, by death, of a wage earner in the home.

Table 11. Cases Opened for General Relief by Reason for Opening, July 1979-June 1980

Reason for Opening	Number	Per Cent
TOTAL	7,513	100.0
Change in economic circumstances because of:	6,749	89.8
Loss of employment benefits to persons in home		
Illness or disablement	6,598	87.8
Lay-off, discharge, or other reason	27	0.4
Resources exhausted	86	1.1
Loss of a wage earner in home by death	6	0.1
Loss or reduction of income from outside the home	17	0.2
Other loss of income	15	0.2
No material change in economic circumstances:	764	10.2
Transfer from other assistance	53	0.7
Other	711	9.5

Table 12 lists the number of General Relief cases closed and the reason for each closing. A total of 5,968 closings in Fiscal Year 1979-80 occurred. Miscellaneous reasons constituted 29.4 per cent of the closings, and approval and receipt of another type of public or private aid was the cause of 25.8 per cent of all closings. (Look at caveat under Table 12 for other examples of all other reasons for closings.)

Table 12. Number of General Relief Cases Closed, by Reason for Closing, July 1979-June 1980

Reason for Closing	Number	Per Cent
All cases closed	5,968	100.0
Obtainment of employment or increased earnings of person in home	168	2.8
Receipt of another type of public or private aid	1,540	25.8
Death	144	2.4
Ineligible--need decreased	72	1.2
Could not be located	548	9.2
Voluntary request of discontinuance	543	9.1
Transferred to other assistance	755	12.7
Change in law or agency policy	4	0.1
Do not continue to meet disability requirement	438	7.3
All other reasons*	1,756	29.4

* Includes such reasons as refusal after acceptance to comply with agency policy, value of property increased beyond agency maximum, admitted to institution, employable person in household, emergency met, change in payee and refusal to obtain medical examination.

BLIND PENSION

The Blind Pension program, the objective of which is to provide for the needs of blind persons unable to qualify for the State Aid to the Blind program, provides monthly pensions to blind residents of Missouri. This program established in 1921, is financed entirely from state funds derived from a special property tax. Blind Pension payments are set by law at $160 per month, remaining consistent with the previous year. If residing in a practical nursing home, recipients may receive a maximum of $300.

As can be seen in Table 13, the amount of Blind Pension payments for Fiscal Year 1979-80 increased 277,900 over last year and totaled $879,680, with an increase of only $340 between two consecutive months and as high as $3,200 between two previous consecutive months. The number of recipients increased by 98 throughout the year, remaining consistent with last year's increase of 87 recipients.

Table 13. Number of Recipients and Amount of Payments for Blind Pension, July 1979-June 1980*

Month	Number of Recipients	Amount of Payments
TOTAL	XXX	879,680
1980		
June	500	80,500
May	487	78,460
April	481	77,500
March	466	75,140
February	466	75,140
January	462	74,360
1979		
December	456	73,400
November	446	71,800
October	443	71,460
September	432	69,600
August	422	67,760
July	402	64,560

* For data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

Table 14 denotes that 215 recipients were added to the already existing 374 recipients on roll at the beginning of the year. These 589 exceed the preceding year's total recipients by 154 or 35.4 per cent.

Table 14. Report on Number of Blind Pension Recipients, Additions and Closings, July 1979-June 1980

Case Load	Recipients
On roll beginning of year	374
Added during year	215
Total during year	589
Closed during year	82
On roll at end of year	507

SUPPLEMENTAL NURSING CARE

Financed entirely from State funds and initiated January 1, 1974, supplemental nursing care payments are made to certain eligible adults residing in licensed professional, practical, or domiciliary nursing homes. However, through the initiation of Senate Bill 492 as of July 1979, in addition to adding a licensed boarding home grant of a maximum of $120 for eligible individuals 21 years of age and over to the program, it also increased the maximum grants for eligible individuals 21 and over to $225 if living in a licensed domiciliary home and $300 if living in a licensed practical home or a professional home when the recipient does not qualify for vendor payments.

The maximum grants for an eligible 18-20 year old individual remains $150 if living in a licensed domiciliary home and $200 if residing in a licensed practical home or for a professional home when the recipient does not qualify for vendor payments. However, this group is not covered for care in a boarding home.

An individual who wishes to enter a licensed boarding, domiciliary or practical home must meet either the old age assistance, permanently and totally disabled, aid to the blind or general relief eligibility criteria to be eligible for a nursing care cash grant.

Table 15. Number of Recipients and Amount of Payments for Supplemental Nursing Care, July 1979-June 1980*

Month	Recipients				Amount of Payments			
	Total	Practical	Domiciliary	Boarding	Total	Practical	Domiciliary	Boarding
TOTAL	XXXX	XXXX	XXXX	XXXX	29,250,655	24,979,089	1,941,777	2,329,789
1980								
June	10,578	7,471	805	2,302	2,566,587	2,141,547	169,719	255,321
May	10,578	7,475	806	2,297	2,570,104	2,146,158	169,895	254,051
April	10,446	7,474	794	2,178	2,553,306	2,146,553	166,821	239,932
March	10,395	7,517	793	2,085	2,552,014	2,157,921	165,852	228,241
February	10,149	7,409	785	1,955	2,499,579	2,122,391	163,950	213,238
January	10,067	7,382	792	1,893	2,470,230	2,101,479	164,116	204,635
1979								
December	9,903	7,315	782	1,806	2,424,468	2,068,712	161,550	194,206
November	9,771	7,286	788	1,697	2,401,926	2,056,733	162,154	183,039
October	9,660	7,277	782	1,601	2,379,200	2,047,322	159,878	172,000
September	9,425	7,200	785	1,440	2,329,997	2,017,073	159,304	153,620
August	9,342	7,251	783	1,308	2,305,104	2,012,705	154,250	138,149
July	8,866	7,187	795	884	2,198,140	1,960,495	144,288	93,357

* For data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

As reported in Table 15, in Fiscal Year 1980 there were $29,250,655 expended including practical, domiciliary and boarding payments, with practical payments constituting the highest payments. In June there were 10,578 recipients of supplemental nursing care, 2,249 or 27.0 per cent more than June 1979. This is primarily due to the additional boarding home grant which resulted in housing 2,302 patients by June 1980. The lowest number of total recipients per month was 8,866 in July 1979 and the highest number of recipients per month was in June, with an increase during each successive month.

A total of 7,488 applications were received in Fiscal Year 1979-80. Of the 7,936 applications disposed of 5,832 were approved and 2,104 were rejected. There were 416 applications awaiting disposition at the end of June 1980, which was less than half as many as the previous June. These and other data may be analyzed in Table 16.

Table 16. Applications for Supplemental Nursing Care Received, Disposed of, and Awaiting Disposition at End of Month, July 1979-June 1980*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month≁
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	7,488	7,936	5,832	2,104	XXXX
1980					
June	477	504	357	147	416
May	504	516	373	143	443
April	703	727	571	156	455
March	676	691	523	168	479
February	596	603	452	151	494
January	743	717	523	194	501
1979					
December	491	509	369	140	475
November	579	610	440	170	493
October	625	674	472	202	524
September	531	589	427	162	573
August	708	875	640	235	631
July	855	921	685	236	798

* For monthly data prior to July 1979, see Annual Report for Division of Family Services 1978-1979, p.29.

** Includes such reasons as death, change of residence, and voluntary withdrawal (see Table 18).

≁ Figure usually does not agree with number carried over as pending at first of following month due to adjustment in previous figures.

Table 17 illustrates the reasons for opening supplemental nursing care cases. Among the reasons for openings were illness and disablement which comprised 41.8 per cent of the 5,832 openings in Fiscal Year 1979-80. During the previous Fiscal Year there were 2,192 fewer case openings and the majority of them were due to illness and disablement, also. The next most popular reason for openings in Fiscal Year 1979-80 was resources exhausted (23.5 per cent).

Table 17. Cases Opened for Supplemental Nursing Care by Reason for Opening, July 1979-June 1980

Reason for Opening	Number	Per Cent
TOTAL	5,832	100.0
Change in economic circumstances because of:	4,181	71.7
Loss of employment benefits to persons in home		
Illness or disablement	2,801	48.1
Lay-off, discharge, or other reason		
Resources exhausted	1,370	23.5
Loss or reduction of income from outside the home	8	0.1
Other loss of income	2	*
No material change in economic circumstances	1,651	28.3
Transfer from other assistance	1,355	23.2
Alternate care placement	111	1.9
Institutionalized	30	0.5
Other	155	2.7

* Less than one-tenth of one per cent.

Due to available resources of the applicant, 579 (27.5 per cent) of all applicants were declared ineligible or rejected. Table 18 displays

Table 18. Applications Denied or Otherwise Rejected for Supplemental Nursing Care, by Reason for Rejection, July 1979-June 1980

Reason for Rejection	Number	Per Cent
All Applications Rejected	2,104	100.0
Ineligible because of sufficient income or resources	743	35.3
Available resources of applicant	579	27.5
Earnings of applicant and others in home	111	5.3
Receipt of Veterans Benefits, employer pension or other public assistance	53	2.5
Ineligible for reasons other than insufficient need	140	6.7
Failure to furnish necessary information or comply with agency policy	81	3.9
Admitted to institution	33	1.6
Disability requirements not established	26	1.2
Rejected for reasons other than points of eligibility given above	1,221	58.0
Voluntarily withdrew application	133	6.3
Died prior to approval	179	8.5
To receive another type of assistance	162	7.7
Moved out of state or could not be located	22	1.0
All other reasons	725	34.5

these data. Another 5.3 per cent were rejected because of earnings of the applicant and others in the home. This year 58.0 per cent were rejected for reasons other than the points of eligibility stated above, whereas 61.5 per cent were rejected last year for the same reason.

As shown in Table 19, a total of 3,839 cases in Fiscal Year 1979-80 were closed compared to the 3,075 closed during the prior year. Death of the recipient accounted for 62.9 per cent of the closings. Another 17 per cent were closed for miscellaneous reasons, followed by 5.9 per cent closed because of decreased need.

Table 19. Number of Supplemental Nursing Care Cases Closed by Reason for Closing, July 1979-June 1980

Reason for Closing	Number	Per Cent
All Cases Closed	3,839	100.0
Death	2,412	62.9
Decreased need:		
Obtainment of employment or increased earnings by either recipient or others in household and other economic reasons*	227	5.9
Loss of eligibility for specified reasons other than decreased need:		
Admitted to institution	141	3.7
Moved out of state or could not be located	92	2.4
Voluntary request of discontinuance	63	1.6
All other reasons for loss of eligibility**	250	6.5
All other reasons including receipt of other types of aid	654	17.0

* Includes increased support from persons outside household, and other resources of recipients, spouse, and other persons in household, which lessened need.

** Transfer of property or cash to become eligible, and does not meet citizenship requirement.

SUPPLEMENTAL AID TO THE BLIND

Supplemental Aid to the Blind was initiated January 1, 1974, and is financed entirely through State funds. This program provides financial aid to needy blind persons over age 18 who are unable to support themselves, who live in Missouri, who have less than $2,000 in personal property including cash, negotiable securities, and real property other than the home in which they live (or $4,000 if married and living with spouse) and who meet other requirements as set by law. Effective August 13, 1978, payments were raised from $135 to $160 per month and stayed at that level. These payments cannot exceed that amount unless the claimant is in a practical nursing home in which the maximum payment is $300.

Table 20. Number of Recipients and Amount of Payments for Supplemental Aid to the Blind, July 1979-June 1980*

Month	Number of Recipients	Amount of Payments	
		Total	Average Per Recipient
TOTAL	XXXX	1,280,259	XXXX
1980			
June	798	106,910	133.97
May	795	106,588	134.07
April	792	105,971	133.80
March	797	107,034	134.30
February	793	106,828	134.71
January	795	107,872	135.69
1979			
December	779	105,419	135.33
November	781	105,935	135.64
October	777	105,575	135.88
September	777	105,890	136.28
August	781	106,388	136.22
July	800	109,849	137.31

* For data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

Table 20 denotes the payments of $1,280,259 that were made during 1979-80, the average payment per recipient being $135.27. In June 1980, there were 798 Supplemental Aid to the Blind recipients, indicating a 39 person or 4.7 per cent decrease over Fiscal Year 1978-79.

There were 871 applications received during Fiscal Year 1979-80 which was a decrease of 31 from Fiscal Year 1978-79. Of the 883 applications disposed of, 241 were approved and 642 were denied. As of the end of June 1980, 72 applications were awaiting disposition. These and other data are listed in Table 21.

Table 21. Applications for Supplemental Aid to the Blind Received, Disposed of, and Awaiting Disposition at End of Month July 1979-June 1980*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month≠
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	871	883	241	642	XXX
1980					
June	59	79	18	61	72
May	71	75	22	53	92
April	87	69	16	53	96
March	77	69	19	50	78
February	64	51	13	38	70
January	68	95	31	64	57
1979					
December	74	64	15	49	85
November	63	70	24	46	75
October	79	82	28	54	82
September	73	83	13	70	85
August	90	80	22	58	95
July	66	66	20	46	85

* For monthly data prior to July 1979, see Annual Report for Division of Family Services 1978-1979, p. 33.

** Includes such reasons as death, change of residence and voluntary withdrawal.

≠ Figure does not always agree with number carried over as pending at first of following month due to adjustment in previous figures.

As reported in Table 22, of the 241 case openings, loss of employment benefits to persons in the home due to illness or disablement accounted for 77.6 per cent or 187 of the cases. This compares closely with the prior year's case openings of 274 and illness or disablement of 79.1 per cent of the openings. Constituting 14.1 per cent of openings, transfer from another assistance appeared to be second in importance.

Table 22. Cases Opened for Supplemental Aid to the Blind by Reason for Opening, July 1979-June 1980

Reason for Opening	Number	Per Cent
TOTAL	241	100.0
Change in economic circumstances because of:		
Loss of employment benefits to persons in home		
Illness or disablement	187	77.6
Lay-off, discharge or other reason		
Resources exhausted	13	5.4
No material change in economic circumstances		
Transfer from other assistance	34	14.1
Other	7	2.9

Exactly half of the reasons for rejections were due to being ineligible for reasons other than insufficient need, including vision in excess of statutory limitations or failure to furnish necessary information, as Table 23 indicates. Ineligibility because of sufficient income or resources constituted 35 per cent of the rejections. These correlate closely with last year's percentages of 52 per cent and 33.4 per cent respectively.

Table 23. Applications Rejected for Supplemental Aid to the Blind, by Reason for Rejection, July 1979-June 1980

Reason for Rejection	Number	Per Cent
All Applications Rejected	642	100.0
Ineligible because of sufficient income or resources	225	35.0
Available resources	82	12.8
Other income of applicant	143	22.2
Ineligible for reasons other than insufficient need	321	50.0
Vision in excess of statutory limitations	296	46.1
Failure to furnish necessary information	25	3.9
Rejected for reasons other than points of eligibility given above	96	15.0
Voluntarily withdrew application	47	7.4
Died prior to approval	6	0.9
Moved out of state or unable to locate	5	0.8
All other reasons	38	5.9

Table 24 indicates that obtainment of employment or increased earnings by either recipient or others in the household and other economic reasons constitutes 41.4 per cent of the 278 reasons for closing cases. During the previous fiscal year, death was the number one reason for closings, which dropped to number two this year at 33.8 per cent.

Table 24. Number of Supplemental Aid to the Blind Cases Closed by Reason for Closing, July 1979-June 1980

Reason for Closing	Number	Per Cent
All cases closed	278	100.0
Death	94	33.8
Decreased Need:		
Obtainment of employment or increased earnings by either recipient or others in household and other economic reasons	115	41.4
Loss of eligibility for specified reasons other than decreased need:		
Voluntary request of discontinuance	10	3.6
Could not be located	19	6.8
All other reasons for loss of eligibility*	11	4.0
All other reasons including receipt of other types of aid	29	10.4

* Includes such reasons as vision wholly or partially restored and refusal after acceptance to comply with agency policy.

STATE SUPPLEMENTATION FOR ADULT RECIPIENTS

The Federal Supplementary Security Income (SSI) program, administered by the Social Security Administration, was established by the Social Security Amendments of 1972, which became effective January 1, 1974. The Supplemental Security Income program was created to replace the Federal-State public assistance programs for the aged, blind and disabled. Subsequent amendments required supplementation of basic Federal Supplementary Security Income payments in certain situations.

State supplementation was required under Federal law in order to assure adults on the public assistance rolls in December 1973 that they would not suffer any loss of income from their December 1973 income levels.

Approximately 118,000 aged, blind and disabled persons received assistance in December 1973 at the time of conversion to the SSI program. This group represented a "frozen group" of persons who were assured of continued benefits supplemented either fully or partially from state funds. About 41,000 of the total were found to be eligible for SSI without any state supplementation; 54,000 were found eligible for both SSI and state supplementation; and the remaining 23,000 were ineligible for SSI and, therefore, were supplemented entirely from state funds. The number of these cases will decline steadily as cases are closed by death or other reasons, since no new cases can be added to this group.

The supplemental cases consist of two groups: those that receive both SSI and state supplementation and those that receive state supplementation only. As Table 25 reports, the SSI-SP group showed a total of 20,454 in June 1980, a decrease of 3,699 from the prior June which also decreased from the June preceding it. There were 17,140 former old age recipients, 2,635 former recipients of the aid to disabled program, 665 former aid to the blind recipients, and 14 former general relief recipients.

Table 25. Number of Recipients and Amount of Payments for Adult Programs Converted to SSI-SP, July 1979-June 1980*

Month	Number of SSI-SP Recipients	Adult Program Recipients				Amount of Payments	
		OAA	PTD	AB	GR	Total	Average Per Recipient
TOTAL	XXXX	XXXX	XXXX	XXX	XXX	7,924,746	XXXX
1980							
June	20,454	17,140	2,635	665	14	616,325	30.13
May	20,705	17,357	2,658	676	14	624,231	30.15
April	20,912	17,525	2,691	682	14	629,566	30.11
March	21,219	17,802	2,718	685	14	638,727	30.10
February	21,453	18,011	2,740	686	16	644,578	30.05
January	21,743	18,254	2,774	698	17	653,797	30.07
1979							
December	21,983	18,461	2,797	708	17	660,968	30.07
November	22,271	18,718	2,824	712	17	670,316	30.10
October	22,569	18,982	2,846	724	17	679,289	30.10
September	22,910	19,264	2,896	732	18	690,118	30.12
August	23,252	19,546	2,948	740	18	700,849	30.14
July	23,668	19,876	3,018	753	21	715,982	30.25

* For data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

The second group of supplemental cases are those ineligible for SSI and therefore supplemented entirely from state funds. As indicated in Table 26 there were 7,384 cases in June 1980. This was a decrease of 804 from the prior June. A total of 5,604 (75.9 per cent) were former old age assistance recipients. A total of 1,312 (17.8 per cent) had been aid to disabled recipients, and 468 (6.3 per cent) were former recipients of aid to the blind. The total payments in June, $351,763, was a decrease of $38,562 from June 1979. Total supplemental payments for this fiscal year were $4,415,300 with the average June payment being $47.64.

Table 26. Number of Recipients and Amount of Payments for Adult Programs Converted to SP, July 1979-June 1980*

Month	Number of Recipients	Adult Program Recipients			Amount of Payments	
		OAA	PTD	AB	Total	Average Per Recipient
TOTAL	XXXX	XXXX	XXXX	XXXX	4,415,300	XXXX
1980						
June	7,384	5,604	1,312	468	351,763	47.64
May	7,453	5,647	1,331	475	355,052	47.64
April	7,520	5,700	1,341	479	358,239	47.64
March	7,579	5,747	1,354	478	360,279	47.54
February	7,646	5,792	1,366	488	364,833	47.72
January	7,717	5,844	1,377	496	367,866	47.67
1979						
December	7,765	5,891	1,379	495	368,825	47.50
November	7,816	5,937	1,378	501	370,500	47.40
October	7,864	5,956	1,395	513	373,557	47.50
September	7,933	6,000	1,405	528	377,885	47.63
August	8,001	6,035	1,428	538	381,203	47.64
July	8,087	6,101	1,444	542	385,298	47.64

* For data prior to July 1979, see Appendix B, Tables IV and V, and previous reports of the Division of Family Services.

FAIR HEARINGS AND APPEALS

An applicant or recipient of public assistance has the right to appeal any decision of a county family service office with whom he is having a grievance under provision of the Social Security Law. Based on any of the following reasons, an applicant may appeal: denial of his application, discontinuance of payment, or the amount of payment for which the applicant is determined to be eligible within 90 days from the date of the determination by the family services county office, or on the basis of unreasonable delay in action at any time. The appeal to the Director of the Division of Family Services, is from the decision of the county office. An appeal is filed, a hearing is scheduled and the appeal is held in the county of the appellant's residence. On the basis of a record of all testimony that is made and preserved, the Director of Family Services renders a decision, either reversing or upholding the action of the county family services office. In March 1975, a new appeal hearing procedure was introduced with all predetermination appeals to be state level hearings.

In Fiscal Year 1979-80, a total of 2,838 appeals were filed as shown in line two of Table 27. The previous fiscal year exceeded this number by 738 appeals. Since there were 214 cases carried over from the preceding year, there was a total of 3,052 pending dispositions during the year. In Fiscal Year 1979-80, a total of 2,895 were disposed of, a decrease of 620 (17.6 per cent) from the previous fiscal year. Hearings were held in 1,565 appeals. The county office decision was reversed 543 times and affirmed or sustained in 1,022 cases. Total cases pending at the close of the year were 157 which is 57 less than the previous year.

Table 27. Appeals and Fair Hearings, July 1, 1979-June 30, 1980

Item	Number
Total beginning of year	214
Number added during year	2,838
Total open during year	3,052
Total disposed of during year	2,895
Hearings held during year	1,565
Affirmed (Sustained)	1,022
Reversed	543
Withdrawn	547
Dismissed	783
Total pending end of year	157

FOOD STAMP PROGRAM

The Food Stamp Program is a nationwide program that helps low income families buy the foods they need for good health. The program is authorized by Congress, administered nationally by the United States Department of Agriculture's Food and Nutrition Services, and is directed by the State Division of Family Services and their local offices. Administrative costs are shared by Federal and State governments.

Members of participating households, with the exception of those households located in Greene, Jackson, St. Louis City, and St. Louis Counties, receive an allotment of food coupons based on the United

States Department of Agriculture's "economy" diet. This allotment is adjusted semiannually according to the United States Department of Labor's analysis of the cost of food. Participating households receive their coupons by direct mail issuance from the State Office.

The household may use its coupons in any grocery store, anywhere in the United States that has been authorized by the United States Department of Agriculture Food and Nutrition Service to accept coupons. The coupons may be used as cash to purchase any food product prepared for human consumption except alcoholic beverages and tobacco. They may also be used to buy seeds and plants for use in gardens to produce food for the personal consumption of the household. In that the dispensing of food coupons is no longer in practice in Greene, Jackson, St. Louis City, and St. Louis Counties, members of these participating households may redeem their Authorization to Participate card (ATP) for their allotment of coupons at county issuing offices or participating banks.

The Food Stamp Program differs from other income programs in that it is a hunger program based mainly on adjusted monthly income rather than a poverty program based on property maximum and need determination. Households are not required to adjust their standard of living in order to participate. The Food Stamp Program primarily serves single persons or families and unrelated persons rather than unrelated groups.

Eligibility requirements of the Food Stamp Act of 1979 are as follows: In order to provide higher benefits to the households with the lowest income, the income maximums were lowered based on guidelines set by United States Department of Agriculture which were higher than the Federal Poverty Guidelines set by the Office of Management and Budget. These figures are adjusted annually. The age requirement for work registration was changed to include household members between the ages of 18 and 60 instead of 65. Students who claim exempt status because of enrollment at least half time at any school must now register for work when any school recess or vacation exceeds 30 days. The food stamp income and eligibility determinations are the same for all households regardless whether they are recipients of cash grant programs.

Measures enacted by Congress in May 1980 will curb potential food spending by about $150 million this year and $600 million in Fiscal 1981.

A total of $131,460,881 in Food Stamps was distributed during the 1979-80 Fiscal Year, an increase of $34,285,426 over last year's total. The June 1980 average value per person was $36.03, and the average monthly value per person for the entire Fiscal Year was $34.75. In that the purchase requirement was eliminated before the start of this Fiscal Year, there is no longer a value of bonus coupons which differs from the total dollar value of the stamps. Presently, there is simply the dollar value of the stamps. As shown in Table 28, the number of households participating increased from 93,943 to 126,843 from the start to the finish of the fiscal year, representing an increase of 35 per cent. As of June 1980, there were 41,866 income maintenance households, and 84,977 non-income maintenance households, together constituting 126,843 households.

Table 28. Food Stamp Program, 1979-1980

Month	Total		Income Maintenance		Non-Income Maintenance		Total Dollar Value of Stamps	Average Value Per Person
	Households	Persons	Households	Persons	Households	Persons		
TOTAL	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	131,460,881	XXXX
1980								
June	126,843	350,407	41,866	133,992	84,977	216,415	12,625,099	36.03
May	125,110	345,820	41,488	133,136	83,622	212,684	12,290,341	35.54
April	125,443	348,130	41,098	132,139	84,345	215,991	12,424,281	35.69
March	124,441	346,500	40,419	130,468	84,022	216,032	12,475,801	36.01
February	121,257	339,174	39,672	128,551	81,585	210,623	12,245,800	36.10
January	115,941	324,121	38,761	125,465	77,180	198,656	11,619,672	35.85
1979								
December	109,814	307,961	37,942	123,216	71,872	184,745	10,462,831	33.97
November	104,457	294,164	37,428	121,641	67,029	172,523	9,882,292	33.59
October	101,621	286,989	36,859	120,561	64,762	166,428	9,558,774	33.31
September	98,702	280,555	36,050	118,627	62,652	161,928	9,272,877	33.05
August	98,095	280,235	35,966	118,729	62,129	161,506	9,452,574	33.73
July	93,943	268,535	34,852	115,940	59,091	152,595	9,150,539	34.08

FOOD DISTRIBUTION PROGRAM

The Division of Family Services administers the USDA-Donated Foods Program to "non-School" recipient groups. During Fiscal Year 1980, 418 different agencies serving 56,705 persons received USDA-Donated Foods with a purchase value in the amount of $3,749,978 as indicated below.

Recipient Group	Number of Agencies	Participants	USDA Cost
TOTAL	418	56,705	$3,749,978
Charitable Institutions	193	18,501	2,068,340
Nonprofit Summer Camps for Children	158	19,068	174,386
Residential Child Care Institutions	57	2,904	265,865
Title III NPE	10	16,232	1,241,387

This breakdown represents public or private nonprofit agencies. The programs they sponsor may include nursing homes, general hospitals, orphanages, juvenile detention centers, group homes, halfway houses, elderly feeding sites, and summer camps for children.

During the last three Fiscal Years, the dollar value of USDA-Donated Foods has increased threefold. More than half of these foods are donated to agencies of State Government, including the Departments of Mental Health and Social Services. Nearly $1½ million of food assistance were received by Title III Nutrition Programs for the Elderly, which are funded through the Division of Aging.

PART IV

MEDICAL SERVICES

Missouri's medical assistance program became effective in October 1967 as a result of legislation enacted by the Seventy-fourth General Assembly. This program, popularly called "Medicaid" was established under the provision of Title XIX of the 1965 Amendments to the Federal Social Security Act, provides medical services to needy people who are eligible under the conditions listed below.

1. Those who meet eligibility requirements of and receive cash payment for:

    Aid to Families with Dependent Children
    General Relief
    Missouri Supplemental Payments
    Supplemental Aid to the Blind
    Supplemental Nursing Care
    Blind Pension

2. Those who receive Medicaid benefits but no cash payments:

    All recipients of the Medical Assistance program.

    AFDC recipient children ages 18-21 and not attending school (if there are no children eligible for cash payments because of age and non-attendance at school, the caretaker will not be eligible for Medicaid).

    Children in Foster Homes under 21 years of age for whom State homeless, dependent and neglected funds are used as partial or full payment.

    Persons converted from State programs to Federal SSI payment.

    Persons who are certified for vendor payments and reside in participating SNF and ICF facilities.

    AFDC recipients whose cases were closed because of employment or increased wages continue to be eligible for Medicaid for four months from the date of employment or increased wages.

    Certain persons who became ineligible for cash payment as a result of Social Security increases in October 1972.

The various services provided by the medical assistance program for persons eligible under the above conditions are listed in Table 29.

The Missouri Medicaid program is administered by the Medical Services Section of the Missouri Division of Family Services, which works closely with the Federally administered Medicare program. The Medicare program may be described as a 100 per cent Federally funded medical insurance program for the aged and disabled. As with most insurance programs, there are premiums to be paid, deductibles, and costs which exceed the specified coverage. Persons who are eligible for the Medicare program but cannot afford to pay the premiums may, if eligible, have their premiums paid by Medicaid. This service is called Medicare Supplementary Medical Insurance, or Buy-In, and is described in more detail under that title. Medicaid also covers the deductible portion of Medicare, coinsurance costs (costs which exceed the maximum paid by Medicare), and certain other costs for services which are not covered by Medicare for eligible persons. However, Medicaid is always the last source of payment, after Medicare or other insurance.

In Missouri, payments for services to Medicaid eligible persons are made directly to doctors or other providers of services who have signed an agreement to participate in the Medicaid program. The providers must accept the Division of Family Services' payment as full and final and are not permitted to collect a partial fee from the recipient. Each Medicaid eligible person receives a monthly identification card which he presents to a participating provider. The provider then bills the Division of Family Services directly for payment. However, if a service is covered by Medicare, the bill is first processed by a Social Security Administration intermediary, and is then forwarded to the Division of Family Services for payment of the deductible and coinsurance costs.

Expenditures for Medical Services during Fiscal Year 1979-80 totaled $288,717,592 (Table 29). This was an increase of $54.9 million or 23.5 per cent over the prior fiscal year. This $288.7 million figure represents the dollar expenditures during the 12-month period July 1, 1979 through June 30, 1980. This differs from the appropriated amount that is based on services rendered during the 12-month period which are not reflected in this period but may actually be paid at the end of the fiscal year.

Of the $288.7 million expended for medical services during the fiscal year, $117.1 million (40.6 per cent) was spent for aged recipients, $77.8 million (26.9 per cent) for recipients of Aid to Families with Dependent Children (AFDC), $77.1 million (26.7 per cent) for persons receiving disability benefits, $11.4 million (3.9 per cent) for General Relief recipients, $4.0 million (1.4 per cent) for persons receiving Aid to the Blind or Blind Pension benefits and $1.4 million (0.5 per cent) for Child Welfare Services-Foster Care. Concerning the 22 services offered through Medical Services shown in Table 29, Intermediate Care Facilities constituted the largest medical expense, totaling $93,277,134, followed by Inpatient Hospital services ($80,012,932). Services to persons in Intermediate Care Facilities are not covered under the Medicare program.

Table 29. Medical Expenditures by Service and by Program, July 1979-June 1980

Services	Total All Programs	Program						
		Aged	Aid to Dependent Children	Disabled	General Relief	Blind	Blind Pension	Child Welfare Services Foster Care
TOTAL	288,717,592*	117,080,326	77,794,612	77,083,562	11,387,059	3,643,177	286,739	1,442,117
Physicians' Services	19,537,422	3,637,052	10,229,294	4,064,824	1,150,379	211,969	21,707	222,197
Drugs	24,416,310	11,804,373	4,521,981	6,936,625	586,526	444,640	70,843	51,322
Dental Services	10,409,864	1,477,202	6,643,946	1,671,534	400,455	77,035	9,816	129,876
Inpatient Hospital	80,012,932	6,729,798	41,478,857	22,186,374	8,099,395	724,297	36,968	757,243
Outpatient Hospital	13,109,466	575,288	9,584,428	2,141,237	549,917	75,533	4,670	178,393
Intermediate Care Facility	93,277,134	78,366,547	901	13,106,754	114,814	1,557,694	130,424	
Skilled Nursing Care	3,214,692	2,333,975	971	798,653	17,049	62,645	1,399	
X-ray and Laboratory	588,850	163,579	240,013	143,834	28,134	9,301	298	3,691
Ambulance Service	456,555	157,964	139,111	120,106	27,959	9,182	725	1,508
Home Health Services	740,501	89,713	53,004	523,642	33,295	39,338	1,509	
Optometric Services	2,862,284	742,504	1,355,219	570,017	126,930	35,089	2,330	30,195
Clinic Services	3,679,381	675,910	1,942,836	735,320	222,597	68,145	3,214	31,359
Durable Medical Equipment	257,847	27,411	33,599	166,281	14,193	10,636	225	5,502
Audiology	303,386	225,399	8,904	49,654	2,486	13,457	2,381	1,105
Podiatry	55,238	16,862	19,902	14,515	2,782	666	100	411
Rehabilitation	13,704	10,690	197	2,034	708		75	
Family Planning	744,192	512	712,502	22,506	6,002	514	55	2,101
Sterilization	215,551	9	212,359	1,883	1,300			
Early and Periodic Screening	637,539		607,296	1,059	1,962	24		27,198
Mental Hospital	1,236,956	1,057,374	1,339	159,081	176	18,970		16
Buy In	6,472,000	4,878,349	7,953	1,387,342		198,356		
Intermediate Care Facility-Mentally Retarded	26,475,788	4,109,815		22,280,287		85,686		

* Payments for Mental Hospital and ICF-MR include payments made by Mental Health as well as Family Services.

During Fiscal Year 1980, 361,536 different individuals received one or more medical services. This represents a slight (1.4 per cent) increase over the 356,427 individuals served during Fiscal Year 1979.

The monthly expenditures and number of recipients of one or more services during the year are shown below:

Month	Expenditures*	Individuals*
1980		
June	35,460,796	147,933
May	35,603,276	155,009
April	28,820,760	161,129
March	25,026,128	152,908
February	23,690,157	149,217
January	20,639,851	141,283
1978		
December	19,664,012	148,236
November	17,210,208	149,017
October	17,271,523	145,719
September	22,621,766	183,088
August	20,426,401	150,541
July	22,282,714	161,822

* Includes Mental and T.B. Hospital, ICF-MR and Buy In.

When the slight (1.4 per cent) increase in the number of persons receiving one or more services in Fiscal Year 1980 is compared with the 23.5 per cent overall increase in expenditures over the prior fiscal year, it is apparent that medical costs are accelerating more rapidly than the number of persons receiving services. Table 29A compares the increase/decrease in expenditures for the various services from Fiscal Year 1979 to Fiscal Year 1980. The greatest increase in expenditures was for services in Intermediate Care Facilities (up $24,147,922), followed by Inpatient Hospital services (up $8,406,400).

Table 29A. Comparison of Medical Expenditures for FY 1979 and FY 1980

Services	FY 1979	FY 1980	Increase/Decrease Over FY 1979
TOTAL	233,771,258*	288,717,592*	54,946,334
Physicians' Services	21,719,456	19,537,422	-2,182,034
Drugs	20,898,288	24,416,310	3,518,022
Dental Services	7,962,714	10,409,864	2,447,150
Inpatient Hospital	71,606,532	80,012,932	8,406,400
Outpatient Hospital	6,255,342	13,109,466	6,854,124
Intermediate Care Facility	69,129,212	93,277,134	24,147,922
Skilled Nursing Care	1,723,677	3,214,692	1,491,015
X-ray and Laboratory	287,569	588,850	301,281
Ambulance Service	307,124	456,555	149,431
Home Health Services	534,375	740,501	206,126
Optometric Services	2,370,273	2,862,284	492,011
Clinic Services	**	3,679,381	3,679,381
Durable Medical Equipment	**	257,847	257,847
Audiology	**	303,386	303,386
Podiatry	**	55,238	55,238
Rehabilitation	**	13,704	13,704
Family Planning	**	744,192	744,192
Sterilization	**	215,551	215,551
Early and Periodic Screening	**	637,539	637,539
Mental Hospital	5,734,781	1,236,956	-4,497,825***
Buy In	6,462,859	6,472,000	9,141
Intermediate Care Facility-Mentally Retarded	18,682,100	26,475,788	7,793,688***
TB Hospital	96,956	***	-96,956***

* Payments for Mental Hospital and ICF-MR include payments made by Mental Health as well as Family Services.

** Expenditures for these services are included in FY 1979 under totals for physicians, outpatient, and inpatient services, where applicable.

*** Expenditures shown for ICF-MR in FY 1980 include some expenditures for aged recipients which were formerly included under Mental Hospital Services and TB Hospital. TB Hospital expenditures for FY 1980 are included in Inpatient Hospital.

Compared with the prior fiscal year, the overall cost per user was $724.73 per year ($60.39 per month), an increase of $121.27 per user per year and $10.10 per month. Costs per person per month, by program, ranged from a low of $22.68 for Child Welfare Services to a high of $132.09 for the aged.

Type of Assistance	Average Cost Per User Per Year	Average Cost Per User Per Month
Overall Average	724.73	60.39
Aged	1,585.13	132.09
Aid to Families with Dependent Children	342.69	28.56
Disabled	1,271.10	105.93
Blind	1,343.46	111.96
General Relief	953.27	79.44
Blind Pension	596.13	49.68
Child Welfare Services-Foster Care	272.10	22.68

Note: The overall average and average cost for the aged and disabled are exclusive of payments for the Mentally Retarded in Intermediate Care Facilities.

Those persons eligible for Medicaid may receive Services until/unless their cash grant expires or their eligibility status is otherwise altered. Not every eligible person, however, avails himself of the services. The utilization rate for a year is the ratio of users to eligibles. During fiscal year 1979-80, the utilization rate under the various eligibility programs was:

Program	Per Cent
Old Age Assistance	98.1
Permanently and Totally Disabled	94.7
Aid to the Blind	89.9
Blind Pension	83.5
General Relief	96.7
Aid to Families with Dependent Children	77.8
Aid to Families with Dependent Children-Foster Care	93.9
Child Welfare Services	100.0

This utilization rate reflects the number of eligible persons who received services at any time during the year. In any given month, the utilization rate would be considerably lower, since not every eligible person required services every month.

PHYSICIANS' SERVICES

As of June 1980, a total of 7,697 physicians, 6,679 M. D.'s and 1,018 D. O.'s in Missouri and adjoining states were signed up to participate in the Medical Assistance program.

At a cost of $19,537,422, a total of 222,531 different persons received physicians' services during the fiscal year. This represented a 16.8 per cent decrease in number of persons receiving services and 10.0 per cent decrease in total costs. This decrease is somewhat misleading since some of the expenditures that were formerly reported under physicians' services are now reported under clinic services. Payments for physicians' services represented 6.8 per cent of total medical costs incurred during the fiscal year. The average cost per person per month was $29.48, and the average monthly number of persons served was 55,237. The average cost per person per month increased $2.64 (9.8 per cent) and the average monthly number of persons decreased 12,194 (18.1 per cent), compared with the preceding fiscal year.

Concerning the 222,531 users of physicians' services, AFDC recipients constituted the largest group, totaling 60.2 per cent (133,899) of all persons having received physicians' services. The aged, the next largest group, numbered 46,725 or 21.0 per cent of the total. These and similar data are given by program in Table 30.

Table 30. Number of Recipients Receiving Physicians' Services by Assistance Program, July 1979 - June 1980

Program	Number of Different Persons Served During the Year	Average Number of Persons Served Per Month	Total Cost	Average Cost Per Person Per Month
TOTAL	222,531	55,237	19,537,422	29.48
Aged	46,725	15,220	3,637,052	19.91
Aid to Families with Dependent Children	133,899	28,130	10,229,294	30.30
Disabled	28,620	9,057	4,064,824	37.40
General Relief	7,142	1,417	1,150,379	67.65
Blind	2,479	758	211,969	23.30
Blind Pension	267	71	21,707	25.48
Child Welfare Services-Foster Care	3,399	584	222,197	31.71

Payments for physicians' services were made directly to the physician by the Division of Family Services for services rendered to recipients who do not also have Medicare coverage. Physicians' Services for persons under both Medicare and Medicaid were paid by a combination of Supplementary Medical Income (Title XVIIIB of the Social Security Act) and direct payment to the physician of the deductible and coinsurance by the Division of Family Services. During the fiscal year, a total of $3,349,955 was paid in deductibles and coinsurance for persons under both Medicare and Medicaid coverage. This was a decrease of $2,306,678 (40.8 per cent) over the preceding fiscal year.

INPATIENT HOSPITAL SERVICES

There were 793 hospitals in and outside of Missouri participating in the hospital care program as of June 1980.

Under this program for up to 21 days per admission medically necessary inpatient hospital care is purchased. For persons covered by Medical Hospital Insurance, the Division of Family Services pays directly to the hospital the deductible and coinsurance charges up to the limitations in effect. During the 1979-80 fiscal year, these changes were put into effect as of January 1980: the inpatient hospital deductible was raised from $160 to $180 per benefit period; the inpatient hospital coinsurance was raised from $40 to $45 per day; the coinsurance lifetime reserve was raised from $80 to $90 per day. The Title XIX medical program will make the hospital payment for a maximum of 21 days of care per admission if hospitalization is medically necessary after these insurance benefits are exhausted. The Division of Family Services makes reasonable cost payments directly to the hospitals for all recipients not eligible for Medicare benefits.

Table 31. Number of Recipients Receiving Inpatient Hospital Services by Assistance Program, July 1979 - June 1980

Program	Unduplicated Persons	Number of Admissions	Readmission Rate	Total Days Paid	Average Days Per Admission	Total Payments	Average Payment Per Admission
TOTAL	72,399	94,462	1.30	528,664	5.6	80,012,932	847.04
Aged	17,136	20,735	1.21	110,929	5.3	6,729,798	324.56
Aid to Families with Dependent Children	39,065	48,050	1.23	225,836	4.7	41,478,857	863.24
Disabled	10,624	18,167	1.71	136,410	7.5	22,186,374	1,221.25
General Relief	4,236	5,803	1.37	42,362	7.3	8,099,395	1,395.73
Blind	632	885	1.40	8,584	9.7	724,297	818.41
Blind Pension	33	41	1.25	404	9.8	36,968	901.66
Child Welfare Services-Foster Care	673	781	1.16	4,139	5.3	757,243	969.58

During the 1979-80 fiscal year, a total of 72,399 persons was admitted 94,462 times, representing 528,664 days of hospital care. The average number of days per admission for Medicare-Medicaid recipients was 5.3. By program, the average number of days per admission was largest for the blind (9.8), followed by disabled and those receiving General Relief. AFDC and CWS-Foster Care had the lowest number of days per admission. Readmission rates ranged from 1.71 for the disabled to 1.16 for CWS-Foster Care. The average payment per admission was $847.04, and total hospital payments amounted to $80,012,932. These data are illustrated in Table 31.

Compared with the previous fiscal year, the number of unduplicated persons showed a decrease of 2,576 (3.4 per cent), the number of admissions decreased 5,137 (5.2 per cent) and total days paid showed a decrease of 210,173 (28.4 per cent). The average hospital stay decreased by 1.8 days. However, the total payments increased by $8,406,400 (11.7 per cent).

The average payment per admission of $847.04 in 1979-80 was an increase of $128.09 from the previous fiscal year, or about 17.8 per cent. It should be stressed that this average payment includes hospital care for persons also under Medicare coverage for whom the Division of Family Services pays only the coinsurance and deductible costs and blood charges. Partial adjustment can be made for this group by excluding aged and blind recipients.

PRESCRIPTION DRUGS

Participating in the drug program as of June 1980 were 1,256 pharmacies and dispensing physicians. A total of 3,871,368 prescriptions were filled at a cost of $24,416,310 or an average prescription cost of $6.31 during the 1979-80 fiscal year. Receiving one or more prescriptions during the year with a monthly average of 99,155 persons receiving prescriptions was a total of 254,610 unduplicated persons.

The number of persons served increased 9,732 (4.0 per cent), and the number of prescriptions filled increased 303,273 (8.5 per cent) compared with the previous fiscal year. There was an increase of $3,518,022 (16.8 per cent) in the total payment for drugs. This reflects a 45-cent (7.7 per cent) increase in payment per prescription as well as a 0.6 per cent increase in the number of prescriptions per unduplicated person to 15.2.

The largest number of prescriptions and the largest total drug payments were required by the aged, while the blind required the largest average payment per prescription, and the disabled the largest average cost per person per year. The aged received 48.0 per cent of the prescriptions (48.3 per cent of the payments); the disabled received 25.9 per cent of the prescriptions (28.4 per cent of the payments); and AFDC recipients received 21.7 per cent of the prescriptions (18.5 per cent of the payments). The Blind, General Relief, and Child Welfare Services clients received the remaining slightly more than 4 per cent of prescriptions and of payments. By program, these data are given in Table 32.

Table 32. Number of Recipients Receiving Prescription Drugs by Assistance Program, July 1979 - June 1980

Program	Unduplicated Persons	Average Number of Persons Per Month	Number of Prescriptions	Total Payments	Average Payment Per Rx	Average Cost Per Person Per Year
TOTAL	254,610	99,155	3,871,368	24,416,310	6.31	95.90
Aged	66,079	40,048	1,858,055	11,804,373	6.35	178.64
Aid to Families with Dependent Children	138,040	34,000	841,078	4,521,981	5.38	32.76
Disabled	37,771	20,868	1,002,162	6,936,625	6.92	183.65
General Relief	7,139	2,106	88,364	586,526	6.64	82.16
Blind	2,513	1,436	62,043	444,640	7.17	176.94
Blind Pension	428	223	10,065	70,843	7.04	165.52
Child Welfare Services-Foster Care	2,640	474	9,601	51,322	5.35	19.44

DENTAL SERVICES

As of June 1980, a total of 1,515 dentists participated in the dental program. Dentures were made available to all eligible persons in July 1978.

At a total cost of $10,409,864, for a cost per person of $111.37, 93,471 different persons were served during the fiscal year. Both the number of persons utilizing dental services and the costs involved in-

Table 33. Number of Recipients Receiving Dental Services by Assistance Programs, July 1979 - June 1980

Program	Unduplicated Persons	Average Number of Persons Per Month	Total Payments	Average Payment Per Person Per Year
TOTAL	93,471	11,467	10,409,864	111.37
Aged	10,618	975	1,477,202	139.12
Aid to Families with Dependent Children	68,484	8,713	6,643,946	97.01
Disabled	8,651	1,215	1,671,534	193.22
General Relief	3,354	283	400,455	119.40
Blind	428	51	77,035	179.99
Blind Pension	65	7	9,816	151.02
Child Welfare Services-Foster Care	1,871	223	129,876	69.42

creased the persons by 12,516 or 15.5 per cent and the costs by $2,447,150 or 30.7 per cent. Average payment per person per year increased $13.01 or 13.2 per cent, considerably less than last year's 45 per cent increase. Contributing to last year's large increase was Senate Bill 334, which in FY 1978-79 expanded Medicaid dental services to include dentures for persons 21 years or older, with payments retroactive to May 1, 1978.

SKILLED NURSING FACILITIES

Skilled nursing care services are provided only to recipients 21 years of age or over who are certified by Division of Family Services physicians as needing this type of care. As of June 1980 there were 222 nursing homes participating in Missouri's nursing home program, 8 of which were skilled nursing facilities only, 140 which were intermediate care facilities only and 74 which were both skilled and intermediate nursing care facilities.

A total of 1,508 different persons received skilled nursing home care at a total cost of $3,214,692 during the 1979-80 fiscal year. The average per diem cost to the program was $26.80. The number of patients in skilled nursing homes averaged 360 per month. Skilled nursing home expenditures represented approximately 1.1 per cent of total expenditures for medical services during the fiscal year. Concerning the 1,508 persons who received skilled nursing care, the aged and disabled accounted for 97.1 per cent (79.3 and 17.8 respectively); general relief and blind persons accounted for the remainder.

Table 34. Number of Persons Receiving Skilled Nursing Home Services and Expenditures, by Program, Ju[illegible] 1979 - June 1980

Program	Unduplicated Persons	Total Days Paid	Average Days Per Person Per Year	Total Cost	Average Number of Persons Per Month	Average Cost Per Day
TOTAL	1,508	119,934	80	3,214,692	360	26.80
Aged	1,196	89,637	75	2,333,975	280	26.04
Aid to Families with Dependent Children	2	38	19	971		25.55
Disabled	269	28,114	105	798,653	73	28.41
General Relief	8	524	66	17,049	2	32.54
Blind	30	1,541	51	62,645	5	40.65
Blind Pension	3	80	27	1,399		17.49

Compared to the previous fiscal year, total costs showed an increase of $1,491,015 (86.5 per cent), and the number of unduplicated persons receiving care increased by 527 (53.7 per cent). As the average monthly number of patients increased by 124 (52.5 per cent) the average per diem cost increased $8.43 (45.9 per cent) to $26.80. The average number of days per person per year was 80, a decrease of 16.7 per cent from the prior year.

INTERMEDIATE CARE FACILITIES (ICF)

Initiated in 1974, this program provides vendor payments for nursing care when an individual is in need of more skilled care than that offered by practical nursing homes but does not fully require skilled nursing home care. Effective October 1975, the minimum age requirement for these services was 18 years.

A total of 20,388 individuals received services in intermediate care facilities during the 1979-80 fiscal year, with an average of 12,223 persons receiving ICF services each month. These figures represent an increase of 4,467 (28.1 per cent) in the total count of unduplicated persons and a 17.5 per cent increase of 1,822 persons per month. Total expenditure for the year was $93,277,134 (up $24,147,922 or 34.9 per cent) for an average per diem cost of $20.39.

Table 35. Number of Persons Receiving Services in Intermediate Care Facilities, and Expenditures, by Program, July 1979 - June 1980

Program	Unduplicated Persons	Total Days Paid	Average Days Per Person Per Year	Total Cost	Average Number of Persons Per Month	Average Cost Per Day
TOTAL	20,388	4,574,995	224	93,277,134	12,223	20.39
Aged	14,156	3,896,372	275	78,366,547	10,409	20.11
Aid to Families with Dependent Children	1	43	43	901		20.95
Disabled	5,866	595,310	101	13,106,754	1,594	22.02
General Relief	40	5,443	136	114,814	11	21.09
Blind	282	70,200	249	1,557,694	189	22.19
Blind Pension	43	7,627	177	130,424	20	17.10

Note: Totals exclusive of persons and payments for mentally retarded in Intermediate Care Facilities.

Of the average number of persons (12,223) in intermediate care facilities each month 10,409 or 85.2 per cent were aged; 1,594 or 13.0 per cent were disabled; 209 or 1.7 per cent were recipients of Blind Pension or Aid to the Blind; and 11 or 0.1 per cent were General Relief recipients. The average number of days per person per year was 224 (down 11.8 per cent).

OUTPATIENT HOSPITAL SERVICES

Although many different services are provided in hospital outpatient facilities, 85 per cent of total services rendered can be classified as radiology. Participating in the Outpatient-Inpatient care program as of June 1980 was a total of 793 hospitals.

The unduplicated number of individuals served during Fiscal Year 1979-80 was 145,221. The total cost for outpatient services was $13,109,466, and the average cost per patient was $41.92. Compared with the prior fiscal year, total costs increased $6,854,124 (more than doubling), individuals served increased 18,388 or 14.5 per cent, and the average cost per person per month increased $20.23 (also more than doubling).

Table 36. Number of Persons and Expenditures for Outpatient Hospital Services, July 1979 - June 1980

Program	Unduplicated Persons	Total Payments	Average Number of Persons Per Month	Average Cost Per Person Per Month
TOTAL	145,221	13,109,466	26,063	41.92
Aged	14,774	575,288	2,345	20.44
Aid to Families with Dependent Children	107,208	9,584,428	18,710	42.69
Disabled	15,414	2,141,237	3,644	48.97
General Relief	4,819	549,917	859	53.35
Blind	895	75,533	153	41.14
Blind Pension	93	4,670	14	27.80
Child Welfare Services-Foster Care	2,018	178,393	338	43.98

X-RAY AND LABORATORY SERVICES

X-ray and Laboratory Services providers are specialized facilities designed to conduct only outpatient laboratory and radiological tests. Services provided in the outpatient department of a hospital or in a physician's office are not included in these statistics but are included in outpatient hospital and physicians' services statistics. There were 139 independent clinical laboratories participating in the X-ray and Laboratory Service program as of June 1980.

Receiving the services at a total cost of $588,850 or an average user cost of $20.51 (up 59.6 per cent) was a total of 28,707 different individuals and a monthly average of 3,657 persons.

MEDICAL SUPPLEMENTARY MEDICAL INSURANCE "BUY IN"

Medicare presently includes not only those over 65 years of age, but also those under 65 who have received Social Security Disability Insurance for more than two years. The Division of Family Services pays the Supplementary Medical Insurance premium for all cash recipients who meet their criteria, for vendor only recipients who receive Supplementary Security Income payments, and for adult cases converted to Supplementary Security Income. General Relief and Blind Pension recipients are excluded.

Total expenditure for the 1979-80 fiscal year was $6,472,000 which provided Supplementary Medical Insurance for 61,628 recipients. This represented an increase of $9,141 or 0.1 per cent in cost and a decrease of 3,854 or 5.9 per cent in the average number of persons being served per month. The decrease in persons was due primarily to the continued decline in caseload in the Adult Supplementation Programs. During the current fiscal year, the premium was $8.70 per person per month.

EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT OF RECIPIENTS UNDER AGE 21

The goal of the Early and Periodic Screening, Diagnosis and Treatment Program is to ensure that every child eligible for Medical Assistance has the opportunity to receive comprehensive health care when needed. Recipients (children or parents under age 21) can receive EPSDT at their initial acceptance into the program. However, follow-up visits should adhere to the periodicity schedule set up by the Division of Health Advisory Committee.

The focus of the EPSDT screening program differs from a routine physical checkup since its function is to examine an individual for pre-symptomatic signs of illness before medical problems develop. The comprehensive screening services that are provided through EPSDT are:

Physical growth assessment
Physical and developmental history
Unclothed physical assessment
Developmental assessment
Dental assessment
Hearing test
Vision test
Tests for:
    Anemia
    Tuberculosis
    Diabetes
    Urinary tract infections
    Sickle cell anemia
Assessment of nutritional status
Assessment of immunization status

If suspected abnormalities are found during the screening, arrangements are made for diagnosis and treatment by appropriate health professionals. The County Division of Family Services Office provides assistance with scheduling transportation and appointments.

Total screenings during Fiscal Year 1979-80 were 31,633. Payments for screening services for the year totaled $637,539.

HOME HEALTH CARE SERVICES

Home health care services are provided for public assistance recipients age 21 and over and to needy eligible relatives aged 21 or over caring for dependent children, in addition to the services of physicians, dentists, physical therapists, and other services and items available to patients in their homes. The patients must require skilled nursing services similar to those provided in a licensed nursing home. Before a person is eligible for home health care services through Title XIX, medicare benefits must be exhausted. A total of 48 home health agencies participated in June 1980.

Home health care services were provided to 2,613 persons (up 19.2 per cent) or 460 average monthly persons at a total cost of $740,501 during the 1979-80 fiscal year, thus setting the average user cost at $283.39 (up 16.3 per cent). This program accounted for 0.3 per cent of the cost of medical services.

EMERGENCY AMBULANCE SERVICE

If an attending physician certifies that the service is medically necessary, emergency ambulance service is provided. By June 1980, a total of 254 ambulance services were participating in this program.

A total of 12,570 persons or 1,430 average monthly persons received emergency ambulance service at a cost totaling $456,555, during the 1979-80 fiscal year. Average user cost increased 37.6 per cent from the prior fiscal year to the present cost of $36.32.

OPTOMETRIC SERVICES

Optometric Services were added to those provided under Title XIX by the Seventy-sixth General Assembly. Annual visual examinations are covered up to $12 as of 1972. Effective in 1973, glasses for persons under 21 years of age were added. In Fiscal Year 1978-79, the Senate extended Medicaid coverage to include eye glasses (meeting certain standards of correction) and optometric services to recipients age 21 and over. One pair of glasses per year is allowed per recipient under

21, and one pair per three years for those 21 and over. A distinction has been established between limited and complete eye examinations; payment is provided for customary and usual costs up to $12 for limited and $22 for complete examinations.

The General Assembly provided for direct payment to participating providers for artificial eyes, and related services for Title XIX eligible public assistance recipients effective July 1978 with payments retroactive to May 1978. Stock eyes are covered to a maximum allowable of $100, custom eyes to $255, refitting to $60 and cleaning, polishing and checking up to $10. Participating in this program as of June 1980 were 398 optometrists and 200 opticians.

Averaging $57.83 per user for 49,498 persons or 4,674 average monthly persons, optometric services cost $2,862,284.

FAMILY PLANNING

Effective in 1972, Public Law required that family planning services be offered to all appropriate clients. Under Title XIX, payments for these services can be made for the cost of visits to a physician, inpatient hospital or outpatient hospital clinic and for birth control pills and other prescriptions. Referrals for such services may be accepted or rejected by the client without the decision affecting the receipt of assistance or other services from the Division of Family Services. If furnishing information or referral for family planning is contrary to the caseworker's beliefs, he is not required to do so. However, if the claimant desires the information or service, he is to be referred to another worker.

At a total cost of $744,192 (down 7.6 per cent), family planning services were provided to 20,047 different persons (down 13.3 per cent). During the fiscal year drug expenditures were $403,088 (54.2 per cent of the total). Physicians' services cost $223,988 (30.1 per cent of the total); clinic services accounted for $78,112 (10.5 per cent); outpatient hospital expenses totaled $26,512 (3.6 per cent) and inpatient hospital expenses were 12,344 (1.7 per cent). The average user cost was $37.12. Of those families receiving family planning services, 95.7 per cent were AFDC recipients.

VOLUNTARY STERILIZATION SERVICES

Although sterilization services under the Title XIX program were begun in 1976, there continues to be a prohibition against the sterilization of persons who have been judicially declared mentally incompetent and also for minors. Effective March 1979, the Department of Health, Education and Welfare tightened guidelines limiting circumstances under which payments for sterilization can be made, including a requirement that the patient sign a consent form 30 days prior to the procedure (72 hours in case of premature delivery or abdominal surgery).

A total of 772 sterilizations was performed at a total cost of $215,551 during Fiscal Year 1979-80. This was a decrease of 45.2 per cent and 56.9 per cent, respectively, from the previous year.

CLINIC SERVICES

Clinic Services include preventive, diagnostic, therapeutic or rehabilitative services which are furnished to outpatients in a facility which is not part of a hospital but which is organized and operated to provide such services to outpatients. A clinic staff may include physicians, dentists and other practitioners with different specialties.

In Fiscal Year 1980, clinic services were provided to 13,067 persons at a cost of $3,679,381. There were 465 praticipating providers.

AUDIOLOGY SERVICES

As a result of recent legislation, the Title XIX medicaid program began providing audiological services via audiologists and hearing aid dealers and fitters. Audiological testing and evaluation for the dispensing of hearing aids are among the services rendered. All recipients are required to have a medical examination by a physician to establish pathology or disease. This examination may not be waived.

A monthly average of 144 persons received Audiology Services at a total cost of $303,386. There were 118 Hearing Aid Specialists and 21 Audiologists providing these services.

PODIATRY SERVICES

The Missouri Medicaid program began covering podiatrists' services in July 1979. Podiatrists' services may be provided in the podiatrist's office, the recipient's home, the hospital, or any other location. Medically necessary services of a podiatrist include medical, surgical or mechanical services for the foot or any area not above the ankle joint. Coverage of routine foot care is not provided under Podiatry Services.

In Fiscal Year 1980, there were 78 participating providers of podiatry services. An average of 173 persons per month were treated, at a total cost of $55,238.

REHABILITATION CENTERS

A new category under the durable medical equipment program, the Rehabilitation Center program, pays for the adaptive training of Medicaid recipients receiving prosthetic/orthotic devices. The following services are provided:

Comprehensive Evaluation
Stump Conditioning
Prosthetic Training
Orthotic Training
Speed Therapy
Occupational Therapy
Orthotic Check-Out Examination
Prosthetic Check-Out Examination
Activities of Daily Living Check-Out Examination

Rehabilitative training is covered by Medicaid for the following prosthetic devices:

Artificial Arms
Artificial Legs
Artificial Larynx
Orthotics

Medicaid paid a total of $13,704 to seven providers who assisted an overall average of one person per month in rehabilitation centers.

INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED

As of late Fiscal Year 1975-76, mentally retarded recipients age 18 and over or those having related conditions and residing in intermediate care facilities for the mentally retarded became included under Title XIX. Epilepsy, cerebral palsy and other developmental disabilities are considered related conditions. Also included in this category in Fiscal Year 1980 are payments for eligible persons 65 years old or more who receive services in mental hospitals and tuberculosis hospitals.

During Fiscal Year 1979-80, a total of 2,079 different persons (a monthly average of 1,575) received ICF-MR at a total cost of $27,712,744. There are five facilities providing this level of care.

DURABLE MEDICAL EQUIPMENT

Effective July 1, 1978, legislation which permits direct payment to participating Durable Medical Equipment providers for services to Title XIX eligible public assistance recipients was enacted. Covered services include purchase or rental of or economically feasible repairs to wheelchairs, walkers, braces, artificial limbs, breast prostheses, hearing aids and artificial larynxes. Such items as bedpans, hospital beds, crutches, and canes are not included under Title XIX Medicaid.

Since wheelchairs and walkers are included in the per diem rate which Medicaid pays to skilled or intermediate nursing facilities, the Division is not billed separately for those items.

There were 248 providers of durable medical equipment. An average of 123 persons per month benefitted from this service during Fiscal Year 1979-80 at a total cost of $257,847.

MEDICAL ASSISTANCE

Claimants can apply for medical assistance if they are ineligible for any other of the state supplemental programs or categorical programs, effective January 1974. (Persons eligible for these programs are automatically eligible for medical assistance.) These claimants have to qualify under specified adjusted gross income requirements in addition to meeting 1972 requirements for the former aged, disabled, or aid to the blind programs. A claimant would be eligible for medical assistance if his adjusted gross income was less than that set out in the amended Social Security Act and other eligibility factors are met. If he is eligible, however, with reference to other requirements but ineligible on the basis of income a special "spenddown" procedure is required. Briefly, this procedure requires computing from his quarterly income the amount a claimant must spend for medical expenses. His eligibility for medical assistance is established for the remainder of the quarter if the computed amount is greater than the amount determined he can afford from his current income.

Applications received during Fiscal Year 1979-80 totaled 45,323 (up 16.4 per cent from last year). Of these, plus the 3,889 applications pending July 1, 1979, 44,634 were disposed of and 4,576 awaited dispositions as of July 1, 1980. Of the disposed of, 27,105 or 60.7 per cent were approved, and the remaining 17,529 were denied or otherwise disposed of.

Table 37. Applications for Medical Assistance Received, Disposed of, and Awaiting Disposition at End of Month, July 1979-June 1980*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month†
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	45,323	44,634	27,105	17,529	XXXX
1980					
June	3,592	3,701	2,398	1,303	4,576
May	3,771	3,505	2,242	1,263	4,685
April	4,350	4,148	2,415	1,733	4,419
March	3,897	4,203	2,597	1,606	4,217
February	3,471	3,570	2,050	1,520	4,523
January	4,818	4,947	2,840	2,107	4,622
1979					
December	3,608	3,394	2,012	1,382	4,751
November	3,787	3,270	2,010	1,260	4,537
October	3,791	3,888	2,370	1,518	4,021
September	3,105	3,110	1,870	1,240	4,119
August	3,835	3,790	2,339	1,451	4,124
July	3,298	3,108	1,962	1,146	4,079

* For monthly data prior to July 1979, see Annual Report for Division of Family Services, 1978-1979, p. 56.

** Includes such reasons as death, change of residence, and voluntary withdrawal.

† Figure does not always agree with number carried over as pending at first of following month due to adjustment in previous figures.

Table 38. Cases Opened for Medical Assistance by Reason for Opening, July 1979-June 1980

Reason for Opening	Number	Per Cent
TOTAL	27,105	100.0
Change in economic circumstances because of:	25,333	93.5
Loss of employment benefits to persons in home		
Illness or disablement	18,724	69.1
Lay-off, discharge, or other reason	99	0.4
Resources exhausted	6,422	23.7
Loss of a wage earner in home by death	57	0.2
Other loss of income	31	0.1
No material change in economic circumstances:	1,772	6.5
Institutionalized	42	0.1
Transfer from other assistance	179	0.7
Other	1,551	5.7

Nearly seven-tenths (69.1 per cent) of all openings were due to loss of employment because of illness or disablement. The second most frequent reason for opening was exhaustion of resources (23.7 per cent).

Table 39. Applications Denied or Otherwise Rejected for Medical Assistance, by Reason for Rejection, July 1979-June 1980

Reason for Rejection	Number	Per Cent
All Applications Rejected	17,529	100.0
Ineligible because of sufficient income or resources	5,246	29.9
Available resources of applicant	3,462	19.7
Employment or earnings of applicant and others in home	1,471	8.4
Receipt of Veterans Benefits, employer pension or other public assistance	313	1.8
Ineligible for reasons other than insufficient need	3,464	19.8
Disability requirements not established	2,397	13.7
Failure to furnish necessary information or comply with agency policy	1,036	5.9
Age not established	31	0.2
Rejected for reasons other than points of eligibility given above	8,819	50.3
Voluntarily withdrew application	2,441	13.9
Died prior to approval	124	0.7
Moved out of state or could not be located	211	1.2
Transferred to other assistance	372	2.1
All other reasons	5,671	32.4

Almost 30 per cent (29.9) of applicants rejected were ineligible due to sufficient income or resources (Table 39). An additional 27.6 per cent of the reasons for rejection was accounted for by voluntary withdrawal of applications and failure to establish disability requirements.

Concerning cases closed during the fiscal year, death accounted for 15.9 per cent of the closings. Only 4.0 per cent were closed due to improved financial situations.

Table 40. Number of Medical Assistance Cases Closed by Reason for Closing, July 1979-June 1980

Reason for Closing	Number	Per Cent
All Cases Closed	22,149	100.0
Death	3,520	15.9
Decreased need:		
Obtainment of employment or increased earnings by either recipient or others in household and other economic reasons*	887	4.0
Receipt of OASDHI or other Federal or State benefits or pensions	1,355	6.1
Loss of eligibility for specified reasons other than decreased need:		
Living in public institution	178	0.8
Moved out of state or could not be located	1,284	5.8
Voluntary request of discontinuance	570	2.6
All other reasons for loss of eligibility	983	4.4
All other reasons**	13,372	60.4

* Includes increased support from persons outside household, and other resources of recipients, spouse, and other persons in household, which lessened need.

** Includes receipt of other types of aid and expiration of three month "spenddown" period.

PART V

SOCIAL SERVICES PROGRAM

Social Services, a major function of the Division of Family Services, is provided for under Titles IV-A, IV-B, IV-C and Title XX of the Social Security Act and various state laws. Social Services provided to the elderly were transferred from the Division of Family Services to the Division of Aging in Fiscal Year 1980. The function of each Federal funding source is:

- Title IV-A social services provided as support to recipients of Aid to Families with Dependent Children.
- Title IV-B provide child welfare services program.
- Title IV-C supportive social services under the Work Incentive Program (WIN).
- Title XX - social services programs for eligible individuals and families.

The Social Service delivery system is directed toward the achievement of one or more of the following goals:

(1) Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependence:

(2) Achieving or maintaining self-sufficiency, including reductions or prevention of dependency:

(3) Preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitation or recruiting families.

(4) Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care; or

(5) Securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

The following is a statistical summary of the number of clients open by goal during Fiscal Year 1979-80:

(1) Achieve or maintain economic self-support	50,057
(2) Achieve or maintain self-sufficiency	51,559
(3) Prevent or remedy abuse, neglect or exploitation	228,225
(4) Prevent or reduce inappropriate institutionalization	1,224
(5) Secure institutional care	112

The following services are available through the Division of Family Services to eligible individuals to assist them in achieving one or more of the established goals:

- Counseling
- Family Planning
- Information and Referral
- Investigation of Abuse, Neglect, or Exploitation
- Placement
- Service Plan Development
- Alternative Care
- Day Care for Children
- Evaluation and Diagnosis
- In-home Services
- Legal Assistance
- Transportation
- Skill Development
- Social Development

Eligible individuals include:

(1) Recipients of aid to families with dependent children, aid to families with dependent children in foster care, supplemental security income, or state supplemental payments.

(2) Individuals whose income does not exceed 68 per cent of the state median income as adjusted for family size.

(3) Any child or persons responsible for the child's care, custody or control or persons who otherwise affect the child's development and well-being on whom a report of abuse, or neglect, or exploitation has been made; or a child who has been identified as being at risk of abuse, neglect, or exploitation; or a runaway minor who has left his/her place of abode without consent of parent, guardian, or other person acting in the capacity of parent.

(4) Individuals requesting only information about or referral for services.

The following is a statistical summary of the number of clients open by eligibility category during Fiscal Year 1979-80:

(1) Income Maintenance	54,211
(2) Income Eligible Recipient (free)	14,632
(3) Protective Service Recipient	286,407
(4) Information and Referral Only Recipient	35,921

Special client groups within the above categories to whom services are directed are:

- Crippled Children
- Public Housing Residents
- Parents Employed or in Training
- Physically Handicapped
- Ex-AFDC

The Division of Family Services provides social services through either direct service delivery or through purchase of service.

A. PURCHASE OF SERVICE (POS)

This program provides for the purchase of a varied range of social services statewide and local, public and private, proprietary and non-profit vendors under a contractual agreement for the purpose of serving a specified client population within a designated geographic area, at negotiated unit rate, in accordance with specified service standards.

Services Available:

- Counseling
- Service Plan Development
- Alternative Care/Residential Treatment
- Day Care for Children
- Evaluation and Diagnosis
- Legal Assistance
- Transportation
- Skill Development
- Social Development
- Detoxification
- Educational Services
- Winterization
- Half-way House

Funding Sources:

A match of locally donated and/or State appropriated funds is used to obtain Federal Title XX funds.

The following are two specific purchase of service programs:

1. Day Care

The Day Care program is a statewide program which provides for the purchase of day care services from qualified providers and individuals for children of income-eligible or Income Maintenance-AFDC recipients families where one or both caretaker relatives are employed or are in training for employment. During

Fiscal Year 1980, an average of 4,410 children received day care services each month.

Funding Sources:

A match of State appropriated funds with either Title XX or Title IV-C funds, depending on client group.

2. Contractual Treatment Services

This is a statewide program which provides counseling, evaluation and diagnosis, in-home services and transportation to families with children in situations of abuse, neglect and exploitation. The Division contracts with approximately 200 private and public providers to deliver these services.

Funding Sources:

A match of State appropriated and Federal funds under Title XX.

Table 41. Children Receiving State Day Care Payments

July 1979-June 1980

	TOTAL	WIN	Non-WIN AFDC	Special Income Eligible	Child Abuse/ Neglect
1979					
July	4,607	1,020	3,124	167	296
August	4,584	1,038	3,062	156	328
September	4,508	973	3,059	135	341
October	4,579	954	3,143	119	363
November	4,418	880	3,088	109	341
December	4,426	858	3,110	106	352
1980					
January	4,385	826	3,100	101	358
February	4,275	785	3,052	89	349
March	4,250	769	3,022	84	375
April	4,350	839	3,015	79	417
May	4,211	783	2,968	75	385
June	4,329	795	3,005	73	456

B. DIRECT SERVICE DELIVERY

This is a statewide service delivery program in which the Division of Family Services employ Social Service staff to provide a range of case planning, investigation, counseling, and placement services to children, and families for the purpose of preventing or remedying abuse, neglect, or exploitation of children, and the preservation of rehabilitation of families with a potential or actual child abuse/neglect problem.

Funding Source:

A match of State appropriated and Federal funds under Title XX.

Major components of direct service delivery are the following:

1. Alternative Care

This is a statewide service program designed to provide substitute family care or non-familial group care for children who are determined by the juvenile court as needing care in a setting other than their natural family home. Alternative care may be provided in any one of three types of licensed foster settings: (1) foster family homes, (2) foster group facilities and (3) residential treatment facilities. Acceptance of any child referred by the court for placement is dependent on the availability of sufficient funds to pay the costs of care and the current availability of an appropriate care setting based on the child's individual alternative care needs.

Available services to children in alternative care settings always include room and board at standardized rates, an initial clothing allowance, payment of regular incidental expenses and medical expenses, and payment of special medically-related and non-medically-related expenses when these expenses are certified necessary to the child's care. In addition, a varied range of treatment services such as educational services and skill development services may be provided in behalf of children who are placed in residential treatment facilities.

During Fiscal Year 1980, there was an average of 5,563 children in foster care each month.

Funding Sources:

a. A match of State and Federal funds under Title IV-A for payment of room and board of AFDC eligible children alternative care setting. By statute, AFDC payments cannot exceed $100 per month per child.

b. A combination of State funds and Federal funds under Title IV-B for payment of the following alternative care costs:

   (1) Room and board for all non-AFDC eligible children in alternative care.

   (2) Supplemental payment to room and board costs for AFDC eligible children in alternative care.

   (3) Initial clothing expense.

   (4) Regular medical expense.

   (5) Special medically-related and non-medically related.

c. A match of State and Federal funds under Title XX for payment of alternative care costs which includes all treatment costs for the duration of a child's placement in a residential facility.

2. Subsidized Adoption

This is a statewide program developed to provide financial benefits in the form of "subsidy payments" to encourage potential adoptive parents to adopt and to finance the cost of adopting hard-to-place children. Beneficiaries of adoption subsidy include any child in adoptive placement who is determined to have been "previously unadoptable" because of a handicapping condition, racial or ethnic minority status, age, social maladjustment, or membership in a sibling group which was unadoptable.

One or all of the following types of subsidy payments may be made in behalf of a child in this program:

a. Regular monthly room and board payments of the same standardized rates as those for alternative care.

b. Recurring payment for treatment of a physically handicapping or other mental or emotional condition which existed at the time of placement.

c. A one-time special services payment to cover a nonrecurring medical, dental, psychiatric or health expense, or an expense associated with the adoptive process.

Funding Source:

100 per cent State appropriated funds.

3. Unmarried Mother Services

This is a statewide service program which provides services and payments to young unmarried or separated mothers with an unwanted pregnancy.

Financial payments may be provided to or in behalf of these clients at standardized rates to assist them with the cost of living in any one of three types of settings: (1) independent living arrangement, (2) alternative care in a foster home, and (3) alternative care in a maternity home.

Additional services to these clients include counseling by Division of Family Services social services staff and payment of all medical care expenses incurred during pregnancy, delivery, and post-natal care.

During Fiscal Year 1980 there was an average of 8.6 unmarried mothers receiving payments in a given month for a total of 106 mothers who received payments. Total cash payments amounted to $22,542. Additional mothers received services but no payments.

4. WIN

The WIN (Work Incentive) program provides supportive services to income maintenance recipients who are voluntarily or mandatorily registered in the WIN program because they are available for work or for work training. Services provided under this program are intended to contribute directly to immediate job placement of clients. This program is currently operated only in selected project areas within the State, including the major metropolitan and urban areas.

The WIN program is jointly administered by the Division of Employment Security and Division of Family Services who have joint responsibility for assessing registrant employability potential, appraising and certifying registrants, establishing the client employability plan, and providing social and employment services.

Approximately 81.98 per cent of the AFDC population in the State is in areas served by WIN projects. In Federal Fiscal Year 1980 there were 24,702 WIN registrations, 5,131 clients were actively worked with, and 6,101 received social services. In State Fiscal Year 1980 AFDC grant reductions due to WIN totalled $6,836,866.

Funding Sources:

A match of State and Federal funds under Title IV-C WIN Day Care is funded through Title XX.

5. Investigation and Treatment of Child Abuse and Neglect

State statutes require the Division to investigate reports of child abuse and neglect.

Treatment services are provided to those families and children when abuse and neglect is substantiated.

Funding Source:

A match of State appropriated funds and Federal funds under Title XX.

To assist in direct service delivery, there are the following support services:

1. Child Abuse/Neglect Central Registry

This registry is a support function for direct service delivery. It was established for the purpose of accepting reports of suspected or actual child abuse, neglect, or exploitation at a centralized confidential receiving station from any mandatory or permissive reports within the State of Missouri. Reports from the public are communicated to the Central Registry Unit for Child Abuse and Neglect via toll free telephone hotline which is manned by Division of Family Services staff on a 24-hour continuous basis.

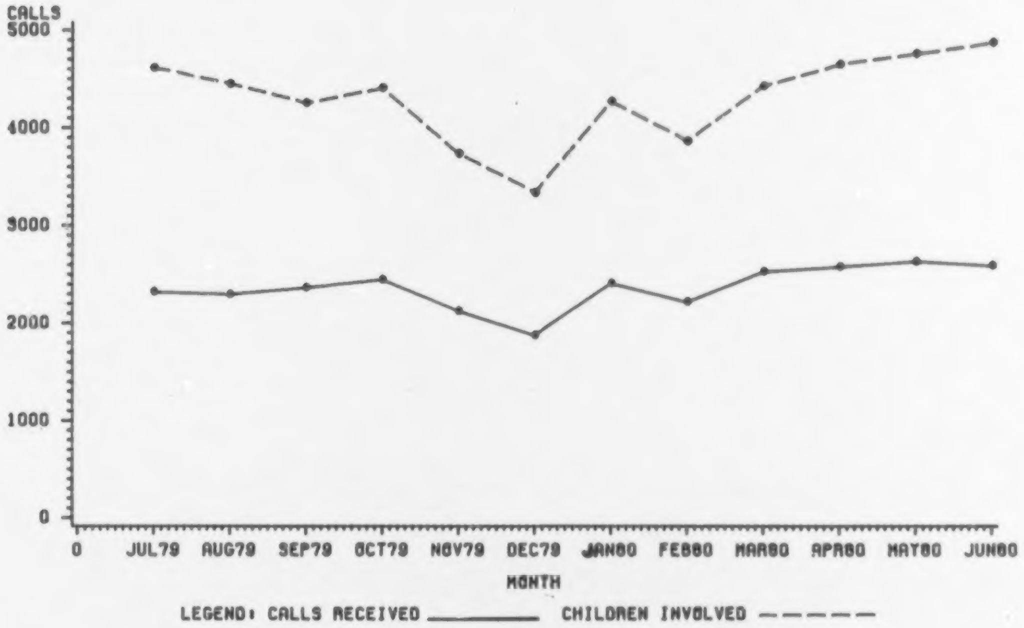
The Central Registry Unit has the functions of maintaining a central file or registry of all reports of incidents of child abuse/neglect and transmitting each report made via the hotline to the appropriate Division of Family Services local office for investigation by Division of Family Services staff. The central registry serves as a source of historical data which is accessed each time a new report is received through the hotline. Any data regarding a previous report(s) which is found to be pertinent to a newly reported incident is transmitted to local staff responsible for performing the investigation. This is intended to serve as a resource for staff carrying out the investigation and to facilitate more fully informed case planning and service delivery to these clients.

All investigations must be performed within 24 hours after the report is referred to the local office by the Central Registry Unit. A status report of the investigation must be submitted to the Central Registry Unit by local Division of Family Services staff within 30 working days of the receipt of each initial report which identifies current dispositional information and services offered and accepted.

Statistical summary information is extracted from the central registry periodically to develop reports for the National Clearing House for Child Abuse/Neglect and for other state planning functions with regard to child abuse/neglect treatment and social services delivery.

In Fiscal Year 1980 the Child Abuse and Neglect "Hot Line" received 28,300 reports involving 51,512 children. About 65 per cent of these reports were substantiated.

Number of Calls to the Child Abuse Hotline and Number of Children Involved in those Calls, by Month, July 1979-June 1980



2. Interstate Compact on the Placement of Children

In September 1975, Missouri enacted the Interstate Compact on the Placement of Children. The Governor appointed the Director, Division of Family Services, as Administrator of the compact; and the Child Placement Coordinator was designated as the Deputy Compact Administrator.

The basic purpose of the Compact is the protection of children involved in interstate placements. The Compact was created because of conflicting state laws, complex administrative procedures, and poor placement practices. The Compact is a legally binding agreement between compact member states. The Missouri statute is RSMo 210.620.

Table 42. Children Receiving Interstate Placement Services, July 1979-June 1980

Type of Service	Number of Children Served
TOTAL	1,685
Missouri	
Relative Home Studies	255
Natural Parent Home Studies	500
Foster Care Licensing and Supervision	50
Adoptive Placement and Supervision	95
Residential Placement	55
Independent Adoptive Home Studies	25
Individual Placement	10
Protective Service or CA/N Referrals	30
Interviewing of Natural Parents	20
Out-of-Missouri	
Relative and Natural Parent Home Studies	300
Divorce Custody Studies	45
Protective Service or CA/N Referrals	35
Interview Natural Parents (child support or adoptive consent)	20
Independent Adoptive Home Studies	35
Courtesy Supervision (adoptive or foster care)	140
Licensing of Foster Care Homes	50
Residential Placements	20

Forty-six states are members of the Interstate Compact on the Placement of Children. These states must follow the procedures and accept the responsibilities set out by the Compact.

There are states that are not members of the Compact. However, the procedure for placement of children remains the same whether placement is in a compact or non-compact state.

Other non-compact states have importation laws that require agencies placing children in their states to abide by those requirements. Interstate placements of children in or out of Missouri are governed by the Compact.

The Compact provides for:

1. Proper notification of placement plans.
2. Evaluation of the proposed placement.
3. Continued responsibility for planning for the child.
4. Jurisdictional arrangements for proper care and supervision.

The Compact involves both compact and non-compact states in the placement of children in:

1. Adoptive home placements.
2. Foster home placements.
3. Relative home placements - with a few exceptions.
4. Child caring facilities - with a few exceptions.

Table 43. Number of Placements through Foreign Placement Service
July 1979-June 1980

Placements	Number of Referrals
Total Referrals	158
Missouri Placements	95
Foreign Adoptive Placements	71
Independent Foreign Adoptive Placements	19
Refugee Placements	5
Out-of-Missouri Placements	6
Foreign Adoptive Placements (via Family and Children's Services of Kansas City)	6
No Placements - Home Studies Pending and Miscellaneous	57
Foreign Adoptive Home Studies	16
Independent Foreign Adoptive Home Studies	11
Refugee Home Studies	23
Miscellaneous Studies (i.e., natural parent interviews, etc.)	7

The Compact involves the following in the receiving or sending of children:

1. Public or private agencies.
2. Courts, juvenile officers, judges.
3. Corporations, associations, charitable agencies.
4. Administrators, child placement workers, officers, employees, persons, or subdivisions of a member state.
5. Natural parents in matters of independent adoptions.
6. Natural parents in matters of independent residential or group home care.

3. Foster Care Tracking

The purpose of Foster Care Tracking is to secure basic descriptive data on all children currently placed in an Alternative Care Foster Care Setting, and to follow the movement of each child who is involved in one or more placements. Statistical and other administrative reports are then generated as a result of demographic and placement data collected through an automated system and used for evaluating current alternative care placement trends, volumes, and characteristics of children entering alternative care.

During the 1979-80 Fiscal Year, 1,482 children in foster care were returned to their home after treatment services. As of June 30, 1980, there were 2,057 children under long term foster care and 6,030 children open for foster care at the end of 1979-80 Fiscal Year.

Table 44. Children Receiving State Foster Care Payments
July 1979-June 1980

Month	Number
1979	
July	5,842
August	5,486
September	5,408
October	5,456
November	5,464
December	5,428
1980	
January	5,493
February	5,634
March	5,684
April	5,668
May	5,705
June	5,487

4. Adoption Exchange

The Adoption Exchange of Missouri (AEM) was established to facilitate the adoptive placement of children statewide by maintaining descriptive information regarding prospective adoptive children and parents in a centralized registry. Information contained in the Exchange may be submitted by and shared among all licensed child-placing agencies who participate in the Exchange. Consent is obtained from or in behalf of all children and families who are registered within the Exchange, including the juvenile court if necessary. The Exchange serves only as an informational resource to cooperating adoption agencies, and does not attempt to supervise the legal process of social service delivery which pertains to individual adoptions. These functions remain the responsibility of the adoption placement agencies and the courts throughout the adoptive process.

There were 230 children registered in the Adoption Exchange of Missouri as being free for adoption at the end of the 1979-80 Fiscal Year. Of these children, all were considered to be hard to place, as defined, by having special needs. The Adoption Exchange of Missouri facilitated the placement of 143 children in adoption during calendar year 1980. This was a placement rate of 62 per cent. For Division of Family Services as a whole, approximately 291 children were placed in an adoptive home. This was a decrease of 39 children and was the result of a slowdown resulting from procedural requirements imposed by the new parental rights law, RSMo.210.

LICENSING OF CHILD CARE HOMES, AGENCIES, AND RESIDENTIAL HOMES

DAY CARE LICENSING

By Statute, the Missouri Division of Family Services is delegated the responsibility of licensing day care facilities which provide care to more than four children, and for establishing uniform regulations and standards to be met for licensing issuance. The standards are minimum standards as intended by Statute. The purpose of licensing is to give parents assurance that undue hazards do not exist, and that the child's daily experiences are conducive to wholesome growth and development. The investigation and supervision of day care facilities is done by designated day care licensing staff. Visits are made on a quarterly basis, on both an announced and unannounced basis, to assure that standards are being maintained. Consultation and technical assistance is also offered through the licensing process. The number of children in licensed child care is rapidly increasing in recent years. Particularly noticeable has been the increase in use of day care centers versus day care homes.

Table 45. Licensed Day Care Homes and Group Facilities, as of June 1980

Type of Day Care	Number of Facilities Licensed	Capacity of Licensed Facilities
TOTAL	1,514	34,973
Family Day Care Homes	625	3,605
Group Day Care Homes	355	3,626
Day Care Centers	534	27,742
Not for Profit	185	
Proprietary	349	

Note: These figures reflect total licensed capacities. They do not reflect the number of centers or capacity for agency funded children.

RESIDENTIAL LICENSING UNIT ACTIVITIES

Under the statutory authority of Sections 210.201 - 210.245, RSMo. 1969, the Residential Licensing Unit is responsible for the licensing of private facilities providing twenty-four hour care to dependent, neglected and emotionally disturbed children, including group homes and child caring agencies, and for the licensing of private child placing agencies providing foster and adoptive services. These licensed facilities are monitored through inspections conducted several times annually to insure maintenance of standards and compliance with the law and applicable rules. Enforcement is achieved through the licensing, denying and revocating process.

These licensed facilities provide substitute care for dependent, neglected or abused children requiring periods of separation from their home settings. Children placed in residential care are referred by the juvenile courts or voluntarily by parent(s) or parent substitutes and are in need of care, treatment and other specialized services. Other children may need permanent placement through adoption and the child placing agencies provide these services to children.

The unit is also responsible for the development, promulgation and issuance of uniform rules which establish standards of service and care to be rendered by the licensed agencies to children. Technical assistance and/or consultation is available through the Residential Licensing Unit to help achieve compliance and to upgrade the quality of services provided by the group homes, child caring and child placing agencies.

At present there are 85 licensed or approved residential facilities and 29 licensed or approved child placing programs or agencies, serving approximately 1,700 children. There are also approximately 400 foster homes inspected, approved and recommended for licensure by the child placing agencies, serving an additional 260 plus children.

PART VI

SERVICES FOR THE BLIND

The Division of Family Services through its Bureau for the Blind administers the following six service programs:

1. Rehabilitation Teaching
2. Vocational Rehabilitation
3. Prevention of Blindness
4. Services to Pre-school Blind Children and their Parents
5. Employment Placement
6. Business Enterprises.

Rehabilitation Teaching

Rehabilitation Teaching may be defined as training and guiding persons through a course of instruction designed to help them carry out all possible necessary activities without the sense of sight. It encompasses specific and identifiable teaching techniques and skills to assist the blind and visually handicapped in developing independence, manual dexterity, skills in communication, home orientation, home management, and personal management.

The purpose of Rehabilitation Teaching is to aid in the adjustment and restoration of visually handicapped persons to an optimal level of functioning in carrying out their responsibilities independently as persons, providers, homemakers, and family members.

The principal objective of the Rehabilitation Teacher is to help clients reach their maximum degree of the usefulness and independent function in a sighted world. Objectives include the development of skills and a philosophy of living that will enable the client to adjust to the seeing world without expecting the seeing world to adjust to him.

The following table shows fiscal year statistics for the rehabilitation teaching program. It shows that 817 cases were open for services at the beginning of the year and that 616 additional cases were accepted during the year, making a total of 1,433 cases served during the year. Services were discontinued to 732 cases, leaving 701 cases active at the end of year.

Table 46. Turnover Report on Rehabilitation Teaching Cases for the Blind July 1979-June 1980

Item	Number
Total cases at beginning of fiscal year	817
Opened for service during year	616
Total cases during year	1,433
Total cases closed during year	732
Total cases at end of year	701

Vocational Rehabilitation

Persons who are legally blind or who have a progressive eye disease that would eventually lead to blindness may be eligible for programs, which assist them to prepare for employment suited to their needs and abilities. One phase of vocational rehabilitation may include a period of concentrated training in a rehabilitation center. Other services offered include:

Counseling and guidance -- adjustment to blindness and choice of vocation

Travel training

Medical evaluation and physical restoration services

Job placement assistance and ongoing services as needed

Specialized products, tools, and aids useful to the blind

Homemaking skills

Education — college, technical, vocational

Table 47. Active Vocational Rehabilitation Cases for the Blind and Cases Closed from Active Load, July 1979-June 1980

Item	Number
Active cases on hand at beginning of year	944
Accepted for services during year	536
Total in active load during year	1,480
Total cases closed during year	423
Placed in employment	302
Closed other reasons — after rehabilitation plan initiated	78
Closed other reasons — before rehabilitation plan initiated	43
Total active cases at end of year	1,057

Administration costs for vocational rehabilitation services totaled $1,353,603 or 51.6 per cent of total costs and went for salaries, travel, Social Security, and Missouri retirement costs.

Case services purchased for persons served totaled $1,270,833 or 48.4 per cent of total costs and included diagnostic and physical restoration services, training, maintenance, transportation and other services.

Table 48. Expenditures for Vocational Rehabilitation Services for the Blind, by Type of Expenditure, July 1979-June 1980

Type of Expenditure	Amount
TOTAL EXPENDITURES	2,624,436
Federal Share	2,156,516
State Share	467,920
Administration: (Total)	1,353,603
Salaries of Employees	988,120
Additions:	
Equipment	7,230
Repairs:	
Office Equipment	1,037
Supplies	6,837
Communications	43,268
Building and Ground Expense	75,313
Travel	84,896
Professional and Technical Services	17,285
Other Services	129
OASDI, Missouri Retirement and Insurance (Federal Fund Only)	129,488
Case Services Purchased for Clients	1,270,833

Prevention of Blindness

Realizing that early detection and treatment of eye problems can often prevent blindness, the Bureau for the Blind may meet the cost of eye care for persons who need and qualify for such care.

The agency provides diagnostic examinations by an eye specialist and may pay for the cost of eye care recommended by the specialist. Vision screening clinics to detect eye problems are held in various areas of the state.

As indicated in the table below, a total of $222,654 was spent for services under the Prevention of Blindness program during the 1979-80 fiscal year. This was an increase of $48,009 (27.5 per cent) over the previous year. This sharp increase is a bit misleading, however, since the previous year showed a decrease under 1977-78. The largest single item of cost was for purchase of hospitalization and surgery.

Table 49. Type of Services Provided by Prevention of Blindness by Amount of Expenditures, July 1979-June 1980

Type of Service	Amount
Total Expenditures	$222,654
Glasses	52,925
Hospitalization and surgery	128,734
Eye examinations and refractions	28,205
Artificial eyes	3,290
Drugs	4,538
Other*	4,962

* Includes physical examinations, tests, laboratory fees, X-rays, and other necessary medical procedures.

During the fiscal year 2,755 services were provided; in addition, 2,481 persons were examined at 15 clinics held throughout the state. A special effort to make better use of the time of the doctors in the field was quite successful; these figures show more than twice as many persons seen per clinic as last year. Examinations showed that glaucoma, cataract, diabetic retinopathy, and strabismus (in children) were the most prevalent eye conditions.

Services to Pre-School Blind Children

Professionally trained teacher/counselors provide services to pre-school blind children throughout Missouri. The purpose of services to visually impaired children and their parents is to offer individual counseling and educational program and to coordinate community services in order that the pre-school blind child may acquire developmental skills and basic concepts to ready him for the regular educational process given to all children. For the blind children who cannot reach this optimum level of development these workers act as guides to other educational opportunities so the child can reach the highest degree of development possible consistent with his level of progress by the age of six.

Employment Placement

Employment is the ultimate objective of the vocational rehabilitation program. This could be full or part-time employment in (1) the competitive labor market, (2) self-employment, (3) homemaking, (4) unpaid family worker, or (5) employment within the sheltered workshop setting. Services offered include:

- Job Placement/Accomodation--These services are provided by employment specialists, counselors, or other professional staff to assist a client in obtaining or maintaining suitable employment.
- Post-Employment--These services are provided to a rehabilitation client to facilitate maintenance of employment.

Business Enterprises

The Business Enterprise Program serves primarily as an agent of self-employment for vocationally rehabilitated clients. The program operates gift shops, snack bars, full-line cafeterias, and food vending activities in both public and private industries. In fact, BEP vending and food service facilities serve an average of over 40,000 customers daily. These attractive employment opportunities for the blind offer good pay and benefits.

At the end of the fiscal year there were 51 vending facilities (two more than at the beginning of the year) with 45 blind operators. Total gross sales of the vending facilities amounted to $3,401,842, while net income paid to operators totalled $762,986; these two figures show a decrease of about 1.4 per cent from last year. The average annual earnings of the vending facility operators was $16,500.

PART VII

CHILD SUPPORT ENFORCEMENT (IV-D)

The Child Support Enforcement Unit (IV-D) was established in Missouri in July 1977 after HB-601 was adopted. The primary goal of the Child Support Enforcement Unit is to reduce the dependency of families on Aid to Families with Dependent Children (AFDC) by establishing and enforcing court ordered child support. By reducing this dependency, the cost of the AFDC program will be lowered. The secondary purpose of the program is to help children realize their right to know who their parents are and to be supported by them.

The Child Support Enforcement Program is mandated by law for AFDC payees and is also available to individuals responsible for the care of children who do not receive AFDC benefits. The former group must make an assignment of support rights to the State for all past, present, and future child support. The assignment remains in effect for all support until the AFDC case is closed. After the closing, the assignment remains in effect for past delinquent child support. The Non-AFDC applicants are charged a fee based on a sliding scale according to their income.

The services provided in both AFDC and Non-AFDC cases are location, establishment of paternity, establishment of a court order for child support, enforcement of a court order and collection of child support. In AFDC cases, the child support is collected, submitted to the State, compared with the AFDC grant and distributed according to Federal regulations. The State receives 39.64 per cent of all retained child support collected on AFDC cases. The State's share of collected child support for Fiscal Year 1980 was $1,895,510.74.

Any child support collected which exceeds the amount of AFDC payments is returned to the payee. The child support collected on Non-AFDC cases is paid directly to the client.

The cost of administering this program is reimbursed by 75 per cent Federal funds.

The State is divided into five districts for the administration of the Child Support Enforcement Program.

District I	St. Louis City
District II	16 counties South of St. Louis which includes the Bootheel Area
District III	52 counties North of Missouri River
District IV	43 counties in Southwest and South Central section of the State
District V	St. Louis County, St. Charles County, and Jefferson County

The Child Support Enforcement Program's collections for Fiscal Year 1980 are shown below by District and State Totals.

District	Total	AFDC	Non-AFDC
State Totals	$8,987,546.10	$4,781,813.18	$4,205,732.92
District I	812,414.94	695,220.86	117,194.08
District II	1,550,612.99	1,168,148.96	382,464.03
District III	4,927,318.57	1,601,420.69	3,325,897.88
District IV	1,314,773.09	1,061,410.18	253,362.91
District V	382,426.51	255,612.49	126,814.02
Fiscal Year 1979	5,264,674.33	3,897,473.73	1,367,200.60
Fiscal Year 1980	8,987,546.10	4,781,813.18	4,205,732.92
% Increase	71%	22.69%	207.62%

Amount Retained by the State

Fiscal Year 1980	1,895,510.74

The increase in Non-AFDC collections may be attributed to at least three major factors. First, the program has become more visible to the public. Second, a large number of previous AFDC recipients have applied for Non-AFDC services after their AFDC case is closed. Finally, the small one-time fee is conducive to new Non-AFDC applicants as the cost of services provided by IV-D in the private sector would be prohibitive for many of our clients.

The value of the Non-AFDC program continues to lie in the fact that by providing Child Support Enforcement services for these clients, they are able to manage financially without receiving AFDC benefits from the State.

The primary goal for Fiscal Year 1981 of the Child Support Enforcement Unit is to collect $11,500,000 in child support payments.

PART VIII

SUMMARY OF EXPENDITURES AND SOURCES OF FUNDS

A review and analysis of expenditures and the sources from which funds were received encompasses the last section of the 1979-80 report.

State appropriations are made for the fiscal year and are accordingly specific in the amount available during the fiscal year. The basis of all grants, contributions or allotments received is utilized in appropriating Federal funds, and therefore the total amount of Federal funds available could not be determined until these funds were actually earned. For comparative purposes, the amounts of Federal funds available are considered to be the appropriation of Federal funds.

Federal matching funds are made available for payments to dependent children and payments for medical care for dependent children, aged, blind, and disabled recipients. The Federal participation for public assistance payments is at the rate of 60.36 per cent of matchable amounts.

The medical assistance program under Title XIX provides vendor payments to suppliers of medical care services and is matched separately from the cash assistance programs.

Between July 1979 and June 1980, a total of $635.1 million in State and Federal funds was expended for assistance payments and administration, as can be seen in Table 50. This was an increase of $70.4 million or 12.5 per cent from the prior fiscal year.

Of total costs $552.9 million or 87.1 per cent was expended on money payments to welfare recipients, vendor payments for medical care, foster care payments, aid to families with dependent children, work training, and day care costs. Of this total, $289.4 million or 52.4 per cent were Federal funds, $263.5 million or 47.6 per cent were state and local funds.

Federal funds for assistance payments showed an increase of $6.7 million or 2.4 per cent, and state and local funds increased by $65.1 million or 32.8 per cent, each respectively compared with the preceding fiscal year.

Also compared with the prior fiscal year, medical assistance (Title XIX plus Buy In) which totaled $288.7 million, increased $38.9 million or 15.6 per cent. Expenditures for aid to families with dependent children totaled $158.0 million, an increase of $12.2 million or 8.3 per cent.

Table 50. **Expenditures Charged Against All Funds for Assistance and Administration, Classified by Programs and Source of Funds, July 1, 1979-June 30, 1980**

	Source of Funds			
	Total	Federal	State	Donated* Local**
ALL EXPENDITURES	635,147,649	343,952,344	288,153,654	3,041,651
Assistance for Recipients	552,943,152	289,478,283	260,867,845	2,597,024
Aid to Families with Dependent Children	158,049,482	94,526,150	63,523,332	
Blind Pensions	890,684		890,684	
Adult Supplementation	10,814,700		10,814,700	
Blind Supplementation	3,042,368		3,042,368	
General Relief	4,165,613		4,165,613	
Nursing Care - Other than Title XIX	30,638,351		30,638,351	
Homeless, Dependent, Neglected Children	6,136,425	1,229,294	4,907,131	
Residential Treatment for H.D.N.	4,473,853	3,355,891	1,117,962	
Purchase of Day Care	4,964,903	4,118,503	846,400	
AFDC Work Training	380,625		380,625	
Purchase of Services - Expenditures to Organizations	19,178,873	16,841,849		2,337,024*
Child Abuse and Neglect - Multi-Disciplinary Treatment	977,748	764,458	213,290	
Title XX Vendor Training	931,551	671,551		260,000**
Medical Assistance, Title XIX ≠	288,717,592	152,067,556	136,650,036	
Indo-Chinese Refugee Assistance	536,408	536,408		
Energy Assistance (Utilicare)	19,043,976	15,366,623	3,677,353	
Reimbursement Under Title IV-D, Child Support Enforcement	3,257,991	3,257,991		
Reimbursement to Counties	2,354,980	2,354,980		
Federal Reimbursement and Local Incentives	903,011	903,011		
Administrative Expense	78,946,506	51,216,070	27,285,809	444,627
Administration of: ⌿ Income Maintenance, Social Services, Medical Services and Administrative Services	66,681,408	40,568,657	25,668,124	444,627*
Blind Administration and Services	2,954,322	2,027,028	927,294	
Title IV-D Child Support Enforcement	2,791,272	2,100,881	690,391	
OASDI, Mo. Retirement and Insurance (Federal Funds Only)	6,519,504	6,519,504		

⌿ Percentage of Total Funds: Income Maintenance, 39.4 percent; Social Services, 30 percent; Medical Services, 3.3 percent; and Administrative Services, 27.3 percent.

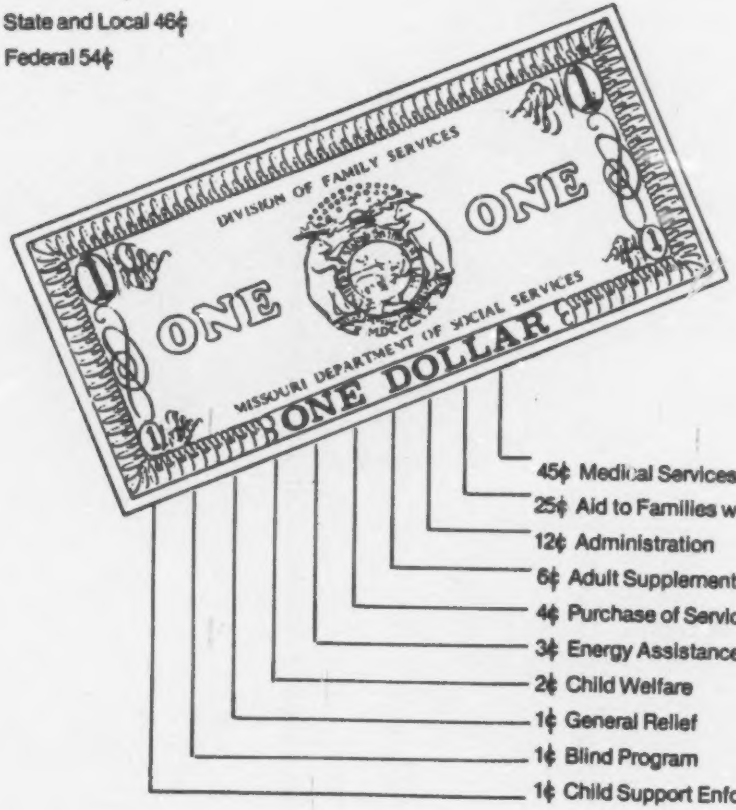
≠ The appropriation for SNF/ICF Title XIX is included in this figure, although it was appropriated in the Division of Aging.

The Welfare Dollar
Fiscal Year July 1979 - June 1980

Came from:

State and Local 46¢
Federal 54¢

Was spent for:


DIVISION OF FAMILY SERVICES
1
ONE
ONE
MISSOURI DEPARTMENT OF SOCIAL SERVICES
ONE DOLLAR

45¢	Medical Services
25¢	Aid to Families with Dependent Children
12¢	Administration
6¢	Adult Supplementation
4¢	Purchase of Service
3¢	Energy Assistance (Utilicare)
2¢	Child Welfare
1¢	General Relief
1¢	Blind Program
1¢	Child Support Enforcement

Expenditure by Source of Funds
Fiscal Year 1979 - 1980

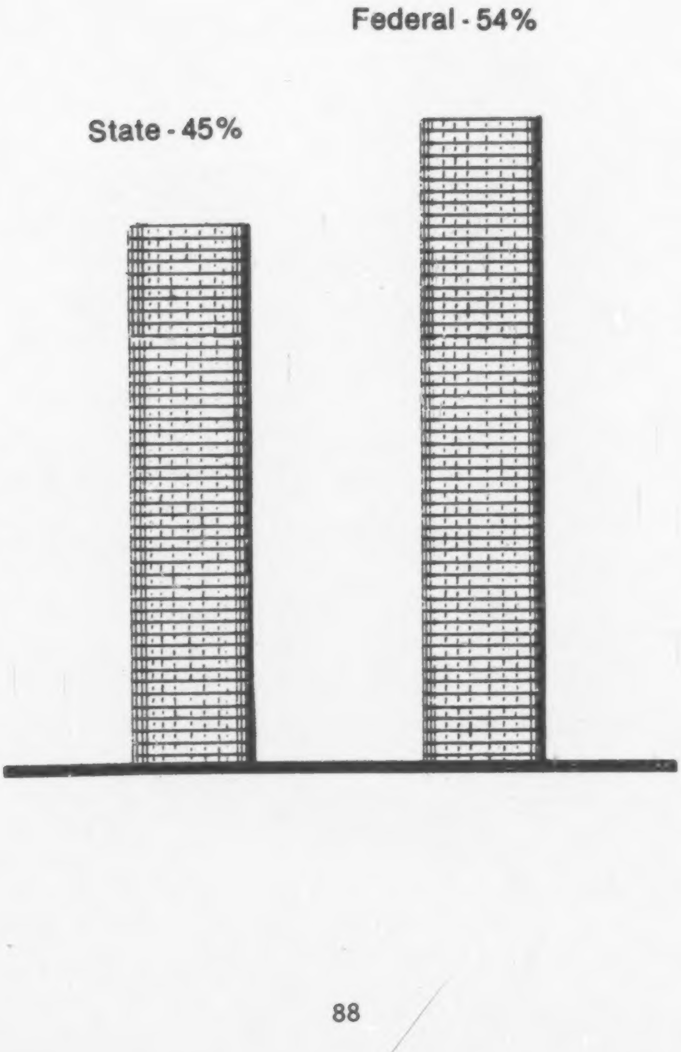


Table 51 outlines costs of administration by specific item of administration. Total expenditures of $78.9 million show a decrease of $2.2 million (2.7 per cent) over Fiscal Year 1978-79.

Table 51. Administrative Costs by Object of Expense, July 1, 1979-June 30, 1980

Object of Expense	Total	General Administration	Child Support Enforcement	Blind
TOTAL	78,946,506	72,826,956	3,035,740	3,083,810
Salaries of Employees	57,891,749	54,749,702	1,936,445	1,205,602
Additions:				
Office and Operative Equipment	428,775	400,121	19,638	9,016
Repairs and Replacements:				
Building, Office and Operative Equipment	51,497	48,084	2,376	1,037
Supplies	1,465,466	1,419,696	38,933	6,837
Communications	3,091,601	2,786,964	261,369	43,268
Building and Ground Expense	4,030,008	3,497,185	453,770	79,053
Travel	2,211,467	2,031,430	58,193	121,844
Professional and Technical Services	1,758,810	1,721,401	20,124	17,285
Other Services	27,378	26,825	424	129
Case Services for the Blind	1,470,251			1,470,251
OASDI, Mo. Retirement and Insurance (Federal Fund Only)	6,519,504	6,145,548	244,468	129,488

Of the total costs of administration, 73.3 per cent or $57.9 million went for staff salaries, thus showing a decrease of 5.5 per cent over the prior fiscal year. Other large expenditures were for OASDI and State retirement, $6.5 million; building and ground expense, $4.0 million; communications, $3.1 million; travel, $2.2 million; and professional and technical services, $1.8 million.

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APPENDIX A.

CHRONOLOGIES OF ACTIVITIES AFFECTING PROGRAMS

July 1, 1979

Effective July 1, 1979, percentage of need in AFDC increased from 70 per cent to 74 per cent.

August 1, 1979

On August 1, 1979, E.D.S. Federal became the fiscal agent for the Missouri Medicaid Program. The Medicaid Management Information System (MMIS) went into effect at that time. MMIS is a billing payment system to pay the claims for all Title XIX covered services.

October 1, 1979

Effective October 1, 1979, Dr. James A. Eastman, became the Director of Research and Statistics.

October 1, 1979

The following changes were made in the state licensing terminology for nursing facilities effective October 1, 1979:

Domiciliary is now called Residential
Practical is now called Intermediate
Professional I and II is now called Skilled

December 30, 1979

Due to recent funding from Department of Health, Education and Welfare and the State of Missouri there is available for use this winter, three programs to assist the elderly and low income families with their energy bills in an effort to prevent hardship and suffering. The programs available are as follows:

1. Utilicare:

   This is a program for persons 65 years of age and over with income under $7,500 per year. Five point one ($5.1) million dollars was appropriated to pay winter heat bills for those persons who are eligible. Clients must apply to the Family Services Office in the county were they reside. Payments are a maximum of $50 or one-half of the heat bills, whichever is less, for the months of December, January, and February.

2. OEO-ECAP - Energy Crisis Assistance Program:

   Funds are available to pay assistance on a one time basis to recipients who have income under 125 per cent of the federal non-farm poverty level.

3. SSI Payments

Missouri SSI recipients will receive $97 each on or about January 7, 1980. The only criteria is that they must be recipients of SSI.

January 1980	During the month of January 1980, the Department of Health, Education and Welfare (DHEW) announced the implementation of a Second Opinion Program. This represents a nationwide effort by DHEW to encourage the general public (not just Title XVIII and XIX patients) to seek a second opinion before deciding on elective surgery. The Medicaid Program will reimburse for second opinions if the patient is Title XIX eligible and if the physician rendering the second opinion is participating in the Title XIX program. Medicaid will also pay for a third opinion if the second opinion does not agree with the first opinion.
May 13, 1980	Effective July 1, 1980, the percentage of need payable in AFDC will be raised from 74 per cent to 79.55 per cent. Also effective July 1, 1980, Social Security (RSDI) benefits will be increased by 14.3 per cent and Supplemental Security Income (SSI) maximum will be increased to $238.00 for an individual and $357.00 for a couple.
May 27, 1980	Mr. James R. Moody became Director of the Division of Family Services.
May 30, 1980	Revised map of Administrative Regions distributed. Effective July 1, 1980, a new system of nine administrative regions will replace the 15 administrative districts for the purpose of supervising program operations in the County Offices. The position of District Supervisor will be discontinued, with a Regional Administrator in charge of each region, assisted by a Program Operations Specialist (SS) and Programs Operations Specialist (IM).
June 18, 1980	Effective July 1, 1980, House Bill 1378 expanded the AFDC unemployed father program to include unemployed mothers. Unemployed mothers must meet the same requirements as unemployed fathers.

APPENDIX B.

SUPPLEMENTARY
STATISTICAL
TABLES

Table I. Average Monthly Number of Recipients Under Programs Administered by the

County	AFDC			GR	
	Families	Children	Persons	Cases	Persons
STATE TOTAL	65,398	130,869	192,577	4,928	5,181
Adair	159	284	445	10	10
Andrew	64	114	171	11	11
Atchison	39	65	97	2	2
Audrain	182	326	492	9	9
Barry	199	375	562	18	19
Barton	59	114	159	5	5
Bates	116	225	332	13	15
Benton	94	169	254	10	10
Bollinger	102	224	333	17	19
Boone	689	1,270	1,898	45	49
Buchanan	1,109	2,050	3,121	115	118
Butler	810	1,586	2,347	100	103
Caldwell	42	67	102	4	4
Callaway	226	400	596	13	14
Camden	162	292	453	15	16
Cape Girardeau	466	852	1,297	44	46
Carroll	117	233	342	15	16
Carter	78	163	234	16	17
Cass	269	472	720	7	7
Cedar	96	185	275	14	16
Chariton	82	153	224	17	19
Christian	194	388	572	12	14
Clark	65	131	198	5	7
Clay	564	931	1,449	59	63
Clinton	96	148	229	7	7
Cole	288	521	796	24	26
Cooper	111	181	273	1	1
Crawford	210	423	632	32	33
Dade	30	61	87	3	3
Dallas	110	206	311	14	15
Daviess	45	94	137	8	9
DeKalb	42	78	116	1	1
Dent	209	394	598	19	20
Douglas	113	227	334	12	14
Dunklin	981	2,064	3,018	70	72
Franklin	489	941	1,438	29	31
Gasconade	51	91	134	6	6
Gentry	43	69	108		
Greene	2,040	3,833	5,847	176	197
Grundy	81	136	205	8	8
Harrison	85	155	238	10	10
Henry	142	277	418	37	40
Hickory	57	113	164	7	7
Holt	42	85	122	7	7
Howard	122	242	350	11	11
Howell	326	586	908	30	35
Iron	159	309	492	13	14
Jackson	10,440	20,682	30,435	559	605
Jasper	858	1,587	2,434	94	99
Jefferson	1,024	1,759	2,760	38	39
Johnson	188	317	489	9	10
Knox	19	39	58	3	3
Laclede	307	581	870	21	23
Lafayette	198	350	522	5	6
Lawrence	231	476	706	27	29
Lewis	74	137	202	5	5
Lincoln	133	243	366	9	9

Division of Family Services, by Program and by County, July 1979-June 1980

County	BP Cases	ABS Cases	NC Cases	SSI-SP Cases	SP Cases
STATE TOTAL	460	790	9,933	21,929	7,740
Adair		5	52	99	14
Andrew		4	49	54	15
Atchison		2	26	29	9
Audrain	8	4	63	110	28
Barry	1	6	88	221	55
Barton	2	3	11	71	15
Bates	5	5	54	103	38
Benton	1	1	21	58	10
Bollinger	1	3	28	143	29
Boone	3	11	94	169	57
Buchanan	13	17	212	275	152
Butler	1	7	58	557	148
Caldwell	3	2	29	72	22
Callaway	6	3	57	103	18
Camden	7	5	27	102	23
Cape Girardeau	6	8	147	226	83
Carroll	1	7	27	73	15
Carter		2	1	86	22
Cass	2	6	64	72	24
Cedar	1	4	4	93	21
Chariton	1		68	75	22
Christian		2	34	132	17
Clark	1	1	14	39	6
Clay	4	10	161	180	88
Clinton		5	106	54	26
Cole	5	2	80	131	47
Cooper		2	123	64	23
Crawford		3	47	127	52
Dade			1	74	9
Dallas		1	24	144	27
Daviess	1	1	11	59	15
DeKalb		1		31	18
Dent	3	3	34	150	28
Douglas	3		8	156	25
Dunklin		17	10	755	145
Franklin	14	15	64	165	58
Gasconade	1	2	48	53	16
Gentry		1	4	70	8
Greene	23	19	328	671	269
Grundy	1	2	7	83	14
Harrison			8	99	11
Henry	2	4	69	128	40
Hickory		2	1	65	9
Holt		2	48	64	15
Howard	1	1	84	91	21
Howell	4	9	44	317	63
Iron		2	21	115	32
Jackson	92	110	1,193	1,518	646
Jasper	22	26	318	501	201
Jefferson	11	16	375	190	115
Johnson	6	6	48	65	21
Knox			20	28	8
Laclede	2	4	52	225	44
Lafayette	1		74	98	25
Lawrence	2	6	16	190	49
Lewis	2	4	75	38	17
Lincoln	1	4	114	71	24

Table I. Average Monthly Number of Recipients Under Programs Administered by the

County	AFDC			GR	
	Families	Children	Persons	Cases	Persons
Linn	110	224	329	11	13
Livingston	120	223	339	14	15
McDonald	171	349	513	32	35
Macon	80	127	195	9	10
Madison	150	295	445	8	8
Maries	50	102	145	4	5
Marion	309	597	904	38	39
Mercer	24	41	66	5	5
Miller	163	302	450	32	33
Mississippi	621	1,368	1,924	63	65
Moniteau	66	126	189	4	4
Monroe	59	105	163	9	10
Montgomery	111	205	310	13	13
Morgan	97	175	263	8	8
New Madrid	802	1,779	2,545	63	66
Newton	289	537	811	32	35
Nodaway	89	160	244	8	8
Oregon	114	234	339	10	11
Osage	33	64	94	5	5
Ozark	105	194	296	24	27
Pemiscot	1,098	2,708	3,679	74	76
Perry	91	180	266	10	10
Pettis	412	757	1,161	38	40
Phelps	250	466	705	23	24
Pike	183	346	533	21	22
Platte	196	342	530	14	15
Polk	137	246	370	15	15
Pulaski	295	540	814	36	39
Putnam	20	39	60	1	1
Ralls	44	83	126	3	3
Randolph	233	458	691	18	19
Ray	121	208	316	7	9
Reynolds	75	141	218	9	10
Ripley	244	504	766	27	29
St. Charles	746	1,292	2,053	55	57
St. Clair	110	212	315	15	17
St. Francois	648	1,199	1,878	43	48
Ste. Genevieve	91	166	256	5	5
St. Louis	7,188	13,309	20,001	262	275
St. Louis City	20,992	45,496	65,116	1,654	1,685
Saline	215	412	602	20	22
Schuyler	36	71	106	1	1
Scotland	14	30	43	2	2
Scott	809	1,618	2,367	52	54
Shannon	86	163	250	6	9
Shelby	48	96	139	9	10
Stoddard	394	773	1,150	74	81
Stone	91	164	250	4	4
Sullivan	57	107	160	9	10
Taney	183	315	488	16	17
Texas	175	355	513	7	8
Vernon	222	428	642	43	46
Warren	111	192	302	5	5
Washington	375	792	1,209	47	51
Wayne	175	336	504	15	15
Webster	138	252	389	14	17
Worth	27	48	69	3	3
Wright	178	344	506	8	8

Division of Family Services, by Program and by County, July 1979–June 1980

County	BP Cases	ABS Cases	NC Cases	SSI-SP Cases	SP Cases
Linn	2	4	28	127	46
Livingston	3	5	161	102	30
McDonald		1	72	105	23
Macon		4	6	102	16
Madison		8	23	106	30
Maries	1			58	12
Marion	6	2	165	145	50
Mercer			2	43	10
Miller	1	5	4	114	29
Mississippi	1	5		318	95
Moniteau	3	8	59	65	12
Monroe	1	4	79	60	18
Montgomery		1	61	51	14
Morgan	3		3	100	32
New Madrid	2	12	11	444	117
Newton	3	4	18	207	34
Nodaway	1		39	97	25
Oregon	2	4	6	182	24
Osage	1	3	24	62	9
Ozark	1	2	7	117	17
Pemiscot	2	10	8	580	136
Perry	1	5	26	70	14
Pettis	8	12	139	206	61
Phelps	6	4	100	145	56
Pike	1	6	149	84	33
Platte			95	41	15
Polk	4	6	39	191	27
Pulaski	1	3	39	128	25
Putnam		1	19	38	3
Ralls		3	17	51	16
Randolph		3	108	121	46
Ray		3	23	61	18
Reynolds			8	101	22
Ripley	3		11	193	60
St. Charles	5	15	109	128	83
St. Clair	1	1	4	98	11
St. Francois	5	16	243	213	87
Ste. Genevieve	2	5	21	33	14
St. Louis	59	48	1,390	863	576
St. Louis City	46	119	1,016	3,614	1,956
Saline	2	5	128	132	61
Schuyler		2	16	45	3
Scotland			11	22	4
Scott	3	9	88	363	141
Shannon		1	2	112	21
Shelby		2	74	64	12
Stoddard	1	12	77	386	151
Stone		1	6	114	31
Sullivan	4	4	121	84	6
Taney		3	59	118	39
Texas	1	4	33	186	49
Vernon	7	9	23	139	45
Warren	1		48	74	26
Washington	1	5	24	150	63
Wayne	1	4	10	187	40
Webster		4	30	207	31
Worth		1	1	20	7
Wright		4	6	230	56

Table II. Cash Payments Extended to Recipients Under Programs Administered by the

County	Total All Programs	AFDC	GR	BP
STATE TOTAL	204,071,523*	153,791,997	4,109,576	879,680
Adair	577,371	362,475	8,655	
Andrew	354,119	142,720	8,879	
Atchison	180,387	79,728	1,470	
Audrain	665,167	386,769	6,791	15,520
Barry	840,638	447,550	15,203	2,400
Barton	195,279	133,682	4,141	3,680
Bates	526,491	267,540	11,626	8,640
Benton	331,841	218,301	8,366	2,560
Bollinger	432,684	252,001	14,876	1,120
Boone	1,875,095	1,501,764	39,578	6,400
Buchanan	3,380,379	2,603,280	95,277	24,000
Butler	2,373,243	1,864,485	79,902	2,080
Caldwell	229,715	90,858	3,058	5,640
Callaway	692,281	467,036	11,332	12,380
Camden	536,318	369,358	12,249	14,240
Cape Girardeau	1,588,990	1,035,979	37,541	11,520
Carroll	419,650	280,999	11,665	1,120
Carter	249,005	187,386	12,582	800
Cass	852,173	596,655	5,923	3,680
Cedar	285,665	210,594	12,403	2,080
Chariton	406,586	168,990	13,943	1,920
Christian	630,649	454,762	10,479	
Clark	200,947	158,556	4,998	1,920
Clay	1,899,581	1,232,084	51,283	7,040
Clinton	590,913	190,877	5,413	
Cole	979,002	625,948	19,890	9,920
Cooper	577,972	230,449	1,120	
Crawford	722,922	518,174	25,271	
Dade	102,135	69,989	2,170	
Dallas	371,691	243,407	11,894	
Daviess	166,155	98,632	6,146	1,920
DeKalb	115,805	94,682	980	
Dent	676,196	493,237	16,112	5,760
Douglas	359,104	257,866	10,774	5,760
Dunklin	2,768,247	2,335,900	56,210	
Franklin	1,498,265	1,138,450	24,710	26,880
Gasconade	270,387	106,621	3,887	2,240
Gentry	112,075	78,705		
Greene	6,411,814	4,779,217	154,406	45,520
Grundy	224,298	174,100	6,147	1,920
Harrison	245,084	183,840	8,374	
Henry	674,678	334,853	29,213	3,840
Hickory	171,337	135,493	5,158	
Holt	291,709	92,136	4,903	
Howard	552,832	260,836	9,104	1,920
Howell	1,026,819	733,652	28,146	7,040
Iron	514,642	397,292	10,171	
Jackson	30,048,562	24,393,323	486,305	177,640
Jasper	3,336,764	1,964,601	72,998	41,280
Jefferson	3,746,305	2,360,741	31,856	21,280
Johnson	635,132	408,658	7,635	12,320
Knox	95,922	44,072	2,100	
Laclede	939,374	692,539	18,091	3,200
Lafayette	718,435	429,881	4,218	1,920
Lawrence	710,705	537,540	21,775	3,680
Lewis	463,683	166,995	3,679	3,840
Lincoln	698,544	297,763	6,602	1,920

* State Total includes $2,419,310 for AFDC-FC not distributed by county.

Division of Family Services, by Program and by County, July 1979-June 1980

County	ABS	NC	SSI-SP	SP
STATE TOTAL	1,280,259	29,250,655	7,924,746	4,415,300
Adair	9,272	150,740	37,693	8,536
Andrew	7,178	164,603	25,682	5,057
Atchison	4,245	80,889	10,876	3,179
Audrain	6,965	196,663	37,667	14,792
Barry	8,469	277,654	67,494	21,868
Barton	4,376	20,148	22,072	7,180
Bates	8,867	171,053	31,882	26,883
Benton	1,920	74,797	16,669	9,228
Bollinger	5,515	99,810	46,129	13,233
Boone	21,438	212,401	65,150	28,364
Buchanan	26,885	439,685	110,417	80,835
Butler	10,705	134,225	195,813	86,033
Caldwell	3,670	94,670	21,019	10,800
Callaway	4,872	148,101	37,981	10,579
Camden	7,521	87,115	33,684	12,151
Cape Girardeau	13,844	361,639	88,691	39,776
Carroll	10,515	89,761	21,402	4,188
Carter	1,918	2,340	31,142	12,837
Cass	9,346	191,378	26,922	18,269
Cedar	5,322	9,299	31,861	14,106
Chariton		190,927	21,197	9,609
Christian	3,060	109,777	39,804	12,767
Clark	2,080	18,096	11,706	3,591
Clay	16,060	457,453	74,232	61,429
Clinton	8,716	353,624	18,652	13,631
Cole	3,848	239,117	51,410	28,869
Cooper	3,040	312,182	22,364	8,817
Crawford	3,704	108,235	40,076	27,462
Dade		3,595	23,278	3,103
Dallas	2,560	35,956	57,151	20,723
Daviess	1,963	33,306	16,390	7,798
DeKalb	2,720	1,172	9,434	6,817
Dent	3,734	90,914	54,175	12,264
Douglas	380	23,267	47,749	13,308
Dunklin	26,295	14,824	269,170	65,848
Franklin	23,421	199,321	56,514	28,969
Gasconade	3,250	127,665	19,682	7,042
Gentry	2,080	4,158	22,130	5,002
Greene	28,059	1,015,886	238,901	149,825
Grundy	2,140	9,242	25,347	5,402
Harrison		18,096	29,252	5,522
Henry	7,348	234,504	38,108	26,812
Hickory	2,800	3,564	20,102	4,220
Holt	3,104	161,280	23,165	7,121
Howard	1,425	230,483	36,306	12,758
Howell	12,307	91,413	116,225	38,036
Iron	3,605	46,487	38,544	18,543
Jackson	183,885	3,814,373	606,009	387,027
Jasper	44,974	944,206	172,188	96,517
Jefferson	25,085	1,165,581	70,688	71,074
Johnson	8,760	161,431	25,086	11,242
Knox		35,891	9,019	4,840
Laclede	7,559	115,933	80,171	21,881
Lafayette	640	234,135	34,801	12,840
Lawrence	7,384	51,923	66,711	21,692
Lewis	6,493	264,484	13,271	4,921
Lincoln	6,563	342,904	29,045	13,747

Table II. Cash Payments Extended to Recipients Under Programs Administered by the

County	Total All Programs	AFDC	GR	BP
Linn	388,826	229,810	9,484	2,880
Livingston	831,954	269,233	11,309	5,280
McDonald	675,492	410,863	27,830	640
Macon	241,755	172,398	7,971	
Madison	498,014	351,417	6,282	
Maries	142,741	110,810	4,340	1,920
Marion	1,355,857	722,797	30,890	10,880
Mercer	73,229	51,297	4,088	
Miller	451,955	359,358	23,662	2,240
Mississippi	1,692,749	1,468,727	51,737	1,920
Moniteau	376,254	152,715	3,280	5,440
Monroe	437,342	124,356	7,492	1,920
Montgomery	447,602	245,724	10,514	160
Morgan	274,270	207,606	6,612	5,760
New Madrid	2,228,043	1,915,732	50,071	3,360
Newton	805,582	662,061	26,869	5,280
Nodaway	357,330	184,188	6,720	1,920
Oregon	364,344	269,558	8,611	3,200
Osage	196,264	74,188	4,321	1,760
Ozark	316,693	237,893	19,450	1,760
Pemiscot	3,013,571	2,662,497	59,613	3,5[illegible]0
Perry	295,935	204,796	8,583	2,240
Pettis	1,513,338	918,261	31,028	15,360
Phelps	979,801	570,183	19,290	10,560
Pike	1,013,185	432,536	16,856	2,080
Platte	788,812	449,660	11,936	
Polk	530,266	301,755	11,789	7,200
Pulaski	897,775	671,274	31,512	960
Putnam	87,718	46,086	490	
Ralls	190,886	95,737	2,648	160
Randolph	987,769	564,735	14,743	
Ray	373,660	265,639	6,699	
Reynolds	243,924	183,764	7,407	
Ripley	715,820	575,879	21,978	5,600
St. Charles	2,166,822	1,703,274	45,199	9,440
St. Clair	305,509	247,302	11,070	2,720
St. Francois	2,334,960	1,553,058	37,185	8,960
Ste. Genevieve	310,149	206,657	3,546	3,040
St. Louis	22,249,354	16,406,806	223,964	113,860
St. Louis City	58,367,104	51,501,192	1,365,767	88,640
Saline	1,008,412	475,958	15,525	3,520
Schuyler	160,425	88,215	630	
Scotland	58,403	34,100	1,610	
Scott	2,413,042	1,860,051	41,153	6,080
Shannon	231,630	175,242	6,153	
Shelby	386,694	105,669	8,099	
Stoddard	1,324,561	882,519	60,883	2,720
Stone	284,922	213,180	2,950	
Sullivan	591,167	130,666	7,411	8,160
Taney	661,561	394,984	14,564	
Texas	546,683	388,547	6,135	1,920
Vernon	707,866	501,742	36,567	13,280
Warren	458,902	244,688	3,697	960
Washington	1,143,453	958,837	39,341	2,240
Wayne	523,961	395,496	12,290	1,600
Webster	483,380	322,390	13,112	
Worth	65,645	51,599	2,114	
Wright	537,090	402,271	6,828	

Division of Family Services, by Program and by County, July 1979-June 1980--Continued

County	ABS	NC	SSI-SP	SP
Linn	7,507	70,157	39,928	29,060
Livingston	9,646	475,338	38,765	22,383
McDonald	2,240	189,265	33,856	10,798
Macon	7,352	13,321	33,134	7,579
Madison	13,361	77,352	37,137	12,465
Maries	320		20,914	4,437
Marion	3,893	493,201	57,406	36,790
Mercer		812	13,980	3,052
Miller	5,190	9,934	38,715	12,856
Mississippi	6,559	900	118,425	44,481
Moniteau	11,980	176,665	20,894	5,280
Monroe	7,480	269,099	17,676	9,319
Montgomery	2,720	162,070	18,586	7,828
Morgan	126	4,601	31,982	17,583
New Madrid	16,969	22,253	151,368	68,290
Newton	5,831	23,760	65,287	16,494
Nodaway		119,279	33,586	11,637
Oregon	6,087	10,329	55,493	11,066
Osage	3,357	86,363	21,456	4,819
Ozark	2,322	7,846	38,475	8,947
Pemiscot	14,075	9,364	197,326	67,176
Perry	7,672	40,585	23,540	8,519
Pettis	18,351	432,069	61,914	36,355
Phelps	7,272	268,988	70,674	32,834
Pike	11,794	506,603	31,701	11,615
Platte		303,083	15,262	8,871
Polk	10,262	107,800	78,061	13,399
Pulaski	4,599	128,563	42,791	18,076
Putnam	960	25,405	12,887	1,890
Ralls	5,474	55,002	25,025	6,840
Randolph	4,840	329,563	42,616	31,272
Ray	6,335	68,374	18,481	8,132
Reynolds		10,358	34,722	7,673
Ripley	294	7,888	67,100	37,081
St. Charles	25,324	267,833	59,258	56,494
St. Clair	1,600	4,188	31,904	6,725
St. Francois	28,278	590,470	70,394	46,615
Ste. Genevieve	7,766	69,779	10,052	9,309
St. Louis	77,582	4,682,354	355,167	389,621
St. Louis City	194,004	2,606,145	1,402,565	1,208,791
Saline	8,626	432,160	44,539	28,084
Schuyler	2,871	56,948	10,485	1,276
Scotland	640	12,795	7,098	2,160
Scott	16,249	285,063	136,512	67,934
Shannon	1,114	2,296	37,093	9,732
Shelby	3,992	239,613	23,045	6,276
Stoddard	18,057	162,450	130,811	67,121
Stone	1,920	14,546	35,621	16,705
Sullivan	7,731	405,314	26,725	5,160
Taney	4,001	190,255	40,284	17,473
Texas	4,106	68,619	55,916	21,440
Vernon	15,603	72,273	45,195	23,206
Warren		148,797	41,123	19,637
Washington	7,650	59,465	47,804	28,116
Wayne	6,365	16,024	66,444	25,742
Webster	3,571	62,224	66,782	15,301
Worth	1,066	3,540	4,020	3,306
Wright	5,390	18,938	78,447	25,216

Table III. Amount of Cash and Vendor Payments Expended Under Programs

County	Total All Programs		
	Total	Cash	Vendor
STATE TOTAL	492,789,115*	204,071,523*	288,717,592*
Adair	1,852,364	577,371	1,274,993
Andrew	1,041,857	354,119	687,738
Atchison	750,016	180,387	569,629
Audrain	2,194,660	665,167	1,529,493
Barry	1,839,253	840,638	998,615
Barton	862,841	195,279	667,562
Bates	1,686,135	526,491	1,159,644
Benton	935,075	331,841	603,234
Bollinger	917,220	432,684	484,536
Boone	4,907,059	1,875,095	3,031,964
Buchanan	9,697,631	3,380,379	6,317,252
Butler	6,904,576	2,373,243	4,531,333
Caldwell	542,745	229,715	313,030
Callaway	2,215,109	692,281	1,522,828
Camden	1,239,337	536,318	703,019
Cape Girardeau	3,858,173	1,588,990	2,269,183
Carroll	791,240	419,650	371,590
Carter	1,071,521	249,005	822,516
Cass	2,023,179	852,173	1,171,006
Cedar	1,820,072	285,665	1,534,407
Chariton	1,282,488	406,586	875,902
Christian	1,099,025	630,649	468,376
Clark	778,611	200,947	577,664
Clay	4,586,098	1,899,581	2,686,517
Clinton	897,911	590,913	306,998
Cole	2,440,297	979,002	1,461,295
Cooper	943,554	577,972	365,582
Crawford	1,679,926	722,922	957,004
Dade	618,094	102,135	515,959
Dallas	1,351,775	371,691	980,084
Daviess	507,861	166,155	341,706
DeKalb	1,138,788	115,805	1,022,983
Dent	2,140,751	676,196	1,464,555
Douglas	1,276,420	359,104	917,316
Dunklin	8,048,662	2,768,247	5,280,415
Franklin	3,952,520	1,498,265	2,454,255
Gasconade	833,288	270,387	562,901
Gentry	1,061,724	112,075	949,649
Greene	15,156,180	6,411,814	8,744,366
Grundy	1,094,421	224,298	870,123
Harrison	829,633	245,084	584,549
Henry	2,284,274	674,678	1,609,596
Hickory	351,733	171,337	180,396
Holt	649,210	291,709	357,501
Howard	1,156,070	552,832	603,238
Howell	2,810,196	1,026,819	1,783,377
Iron	1,777,139	514,642	1,262,497
Jackson	62,271,687	30,048,562	32,223,125
Jasper	7,852,987	3,336,764	4,516,223
Jefferson	5,729,168	3,746,305	1,982,863
Johnson	1,577,224	635,132	942,092
Knox	430,797	95,922	334,875
Laclede	2,666,662	939,374	1,727,288
Lafayette	3,917,716	718,435	3,199,281
Lawrence	3,074,391	710,705	2,363,686
Lewis	862,448	463,683	398,765
Lincoln	1,662,538	698,544	963,994

* State Total on Cash column includes $2,419,310 for AFDC-FC and on Vendor column $11,704,877 for Buy In, Mental and T.B. Hospital and ICF-Mentally Retarded not distributed by county.

Administered by the Division of Family Services, July 1979-June 1980

County	Total All Programs		
	Total	Cash	Vendor
Linn	1,519,822	388,826	1,130,996
Livingston	1,394,401	831,954	562,447
McDonald	1,261,502	675,492	586,010
Macon	1,237,888	241,755	996,133
Madison	1,097,459	498,014	599,445
Maries	345,646	142,741	202,905
Marion	2,644,848	1,355,857	1,288,991
Mercer	402,249	73,229	329,020
Miller	1,250,554	451,955	798,599
Mississippi	4,336,092	1,692,749	2,643,343
Moniteau	926,849	376,254	550,595
Monroe	697,866	437,342	260,524
Montgomery	1,070,242	447,602	622,640
Morgan	1,208,165	274,270	933,895
New Madrid	5,339,865	2,228,043	3,111,822
Newton	1,940,620	805,582	1,135,038
Nodaway	1,302,455	357,330	945,125
Oregon	1,497,487	364,344	1,133,143
Osage	382,908	196,264	186,644
Ozark	761,921	316,693	445,228
Pemiscot	6,854,983	3,013,571	3,841,412
Perry	1,849,351	295,935	1,553,416
Pettis	3,588,814	1,513,338	2,075,476
Phelps	2,669,968	979,801	1,690,167
Pike	1,616,333	1,013,185	603,148
Platte	1,206,932	788,812	418,120
Polk	1,572,154	530,266	1,041,888
Pulaski	1,672,459	897,775	774,684
Putnam	329,320	87,718	241,602
Ralls	343,532	190,886	152,646
Randolph	2,214,320	987,769	1,226,551
Ray	983,625	373,660	609,965
Reynolds	594,615	243,924	350,691
Ripley	2,242,102	715,820	1,526,282
St. Charles	6,006,362	2,166,822	3,839,540
St. Clair	1,250,850	305,509	945,341
St. Francois	6,233,424	2,334,960	3,898,464
Ste. Genevieve	908,419	310,149	598,270
St. Louis	46,096,405	22,249,354	23,847,051
St. Louis City	121,375,681	58,367,104	63,008,577
Saline	5,374,925	1,008,412	4,366,513
Schuyler	599,875	160,425	439,450
Scotland	367,208	58,403	308,805
Scott	5,089,834	2,413,042	2,676,792
Shannon	1,264,046	231,630	1,032,416
Shelby	742,779	386,694	356,085
Stoddard	4,633,177	1,324,561	3,308,616
Stone	576,904	284,922	291,982
Sullivan	948,378	591,167	357,211
Taney	1,934,149	661,561	1,272,588
Texas	1,945,824	546,683	1,399,141
Vernon	8,607,106	707,866	7,899,240
Warren	710,486	458,902	251,584
Washington	2,142,281	1,143,453	998,828
Wayne	1,978,668	523,961	1,454,707
Webster	1,334,450	483,380	851,070
Worth	249,974	65,645	184,329
Wright	1,994,046	537,090	1,456,956

Table IV. Number of Recipients Under Programs Administered

Month and Year	Total - All Types of Assistance		AFDC			AFDC-FC
	Cases	Persons	Families	Children	Persons	Children
1979-1980						
June	113,569	247,872	68,376	135,110	200,383	2,032
May	112,807	245,290	67,368	133,502	197,579	2,025
April	112,335	244,529	67,020	133,237	196,989	2,008
March	112,865	245,402	67,189	133,559	197,474	1,993
February	111,654	242,224	66,097	131,814	194,462	1,970
January	111,496	241,291	65,658	131,174	193,211	2,013
December	109,971	236,951	64,251	128,653	189,025	2,004
November	109,728	236,281	63,887	128,294	188,216	2,024
October	110,072	237,361	64,125	129,024	189,159	2,054
September	109,718	236,471	63,643	128,482	188,064	2,093
August	109,970	237,114	63,661	128,852	188,406	2,164
July	109,582	236,625	63,375	128,696	187,840	2,178
1978-1979						
June	109,422	236,393	63,265	128,792	187,807	2,203
May	109,938	238,642	64,020	130,473	190,310	2,220
April	110,389	239,614	64,150	130,925	191,003	2,166
March	110,968	240,824	64,276	131,469	191,735	2,190
February	110,378	239,190	63,607	130,662	190,150	2,070
January	111,476	241,372	64,239	131,949	191,841	2,108
December	111,565	240,997	63,956	131,759	191,085	2,121
November	112,352	242,559	64,337	132,831	192,264	2,100
October	113,787	245,801	65,269	135,149	195,017	2,073
September	115,053	247,724	66,147	136,980	196,538	2,091
August	117,954	252,797	68,673	141,547	201,241	2,072
July	118,405	253,249	68,527	141,693	201,091	2,059

1/ For monthly data prior to 1978, see the Annual Report of the Division of Family Services.
Data subject to adjustment.

by the Division of Family Services, July 1978-June 1980 1/

Month and Year	GR		BP	NC	ABS	SSI-SP	SP
	Cases	Persons					
1979-1980							
June	5,479	5,743	500	10,578	798	20,454	7,384
May	5,421	5,668	487	10,578	795	20,705	7,453
April	5,164	5,381	481	10,446	792	20,912	7,520
March	5,220	5,479	466	10,395	797	21,219	7,579
February	5,050	5,285	466	10,149	793	21,453	7,646
January	5,054	5,283	462	10,067	795	21,743	7,717
December	4,834	5,036	456	9,903	779	21,983	7,765
November	4,756	4,956	446	9,771	781	22,271	7,816
October	4,634	4,835	443	9,660	777	22,569	7,864
September	4,598	4,837	432	9,425	777	22,910	7,933
August	4,511	4,746	422	9,342	781	23,252	8,001
July	4,384	4,784	402	8,866	800	23,668	8,087
1978-1979							
June	4,287	4,513	363	8,329	837	24,153	8,188
May	4,085	4,279	348	8,091	814	24,339	8,241
April	4,086	4,292	333	8,066	814	24,604	8,336
March	4,060	4,267	321	8,182	812	24,925	8,392
February	3,942	4,141	318	8,109	808	25,136	8,458
January	3,986	4,172	325	8,212	817	25,381	8,516
December	4,030	4,212	321	8,224	811	25,624	8,599
November	4,045	4,225	311	8,300	797	25,887	8,675
October	4,138	4,331	310	8,360	792	26,147	8,771
September	4,206	4,395	301	8,344	776	26,424	8,855
August	4,249	4,452	293	8,320	760	26,719	8,940
July	4,385	4,606	276	8,310	780	27,057	9,070

Table V. Amount of Cash Expended Under Programs Administered
(Exclusive of Vendor

Month and Year	Total	AFDC	AFDC-FC	GR
TOTAL (1979-1980)	204,071,523	153,791,997	2,419,310	4,109,576
June	17,763,599	13,457,322	200,739	383,453
May	17,527,031	13,214,968	199,946	377,682
April	17,452,124	13,170,530	198,206	358,806
March	17,476,948	13,182,987	196,135	364,632
February	17,171,820	12,934,801	194,506	351,555
January	17,041,867	12,819,354	197,496	350,892
December	16,691,838	12,528,284	197,284	333,190
November	16,625,212	12,477,622	199,179	327,934
October	16,666,757	12,535,893	201,894	319,889
September	16,534,794	12,438,034	205,762	317,508
August	16,538,467	12,452,265	212,601	312,297
July	16,581,066	12,579,937	215,562	311,738
TOTAL (1978-1979)	183,575,181	143,032,898	2,499,120	3,355,896
June	14,985,693	11,605,406	216,462	293,528
May	15,087,889	11,757,208	219,433	276,826
April	15,129,363	11,801,114	212,518	276,740
March	15,175,865	11,813,908	214,478	274,762
February	15,016,628	11,681,017	202,523	267,021
January	15,152,503	11,782,678	206,111	269,690
December	15,107,097	11,725,245	207,550	272,900
November	15,208,013	11,807,691	205,422	273,565
October	15,407,335	11,981,463	203,501	280,515
September	15,539,338	12,100,892	205,757	285,161
August	15,888,031	12,502,155	203,742	287,981
July	15,877,426	12,474,121	201,623	297,207

1/ For monthly data prior to 1978, see the Annual Report of the Division of Family Services. (Data rounded to nearest dollar and subject to adjustment.)

by the Division of Family Services, July 1978-June 1980 1/
Medical Care)

Month and Year	BP	NC	ABS	SSI-SP	SP
TOTAL (1979-1980)	879,680	29,250,655	1,280,259	7,924,746	4,415,300
June	80,500	2,566,587	106,910	616,325	351,763
May	78,460	2,570,104	106,588	624,231	355,052
April	77,500	2,553,306	105,971	629,566	358,239
March	75,140	2,552,014	107,034	638,727	360,279
February	75,140	2,499,579	106,828	644,578	364,833
January	74,360	2,470,230	107,872	653,797	367,866
December	73,400	2,424,468	105,419	660,968	368,825
November	71,800	2,401,926	105,935	670,316	370,500
October	71,460	2,379,200	105,575	679,289	373,557
September	69,600	2,329,997	105,890	690,118	377,885
August	67,760	2,305,104	106,388	700,849	381,203
July	64,560	2,198,140	109,849	715,982	385,298
TOTAL (1978-1979)	601,780	18,668,908	1,287,161	9,247,275	4,882,143
June	58,400	1,573,380	115,185	733,007	390,325
May	56,040	1,534,718	111,862	738,304	393,498
April	53,600	1,530,058	111,781	745,674	397,878
March	51,680	1,553,868	111,610	755,563	399,996
February	51,280	1,537,557	110,973	762,795	403,462
January	52,440	1,553,846	112,493	769,104	406,141
December	51,800	1,552,642	111,803	775,136	410,021
November	50,085	1,565,208	110,119	782,864	413,059
October	49,925	1,574,819	109,139	790,509	417,464
September	48,485	1,570,448	106,712	799,313	422,570
August	40,315	1,563,287	86,372	792,030	412,149
July	37,730	1,559,077	89,112	802,976	415,580

Table VI. Amount of Medical Assistance Expended Under Programs Administered by the

Month and Year	Total All Services	Physicians' Services	Drugs	Skilled Nursing Care	Intermediate Care Facility
TOTAL (1979-1980)	288,717,592	19,537,422	24,416,310	3,214,692	93,277,134
June	35,460,796	1,826,297	2,312,473	401,243	8,643,516
May	35,603,276	2,447,944	2,310,506	367,198	8,692,431
April	28,820,760	2,420,075	2,195,714	312,958	8,747,274
March	25,026,128	1,036,549	2,580,381	285,684	7,942,009
February	23,690,157	1,332,353	2,152,772	351,240	8,565,754
January	20,639,851	1,120,271	1,886,270	232,177	8,722,950
December	19,664,012	1,228,644	2,151,557	224,114	6,965,089
November	17,210,208	1,156,829	1,866,021	205,037	7,073,777
October	17,271,523	1,243,814	1,343,339	225,061	6,602,470
September	22,621,766	1,874,822	1,758,948	228,392	7,517,151
August	20,426,401	1,982,864	1,819,051	176,889	6,939,375
July	22,282,714	1,866,960	2,039,278	204,699	6,865,338

Table VI. Amount of Medical Assistance Expended Under Programs Administered by the

Month and Year	Optometric Services	Clinic Services	Durable Medical Equipment	Audiology Services	Podiatry Services
TOTAL (1979-1980)	2,862,284	3,679,381	257,847	303,386	55,238
June	265,897	552,014	42,752	58,172	10,183
May	398,315	728,204	61,059	71,093	12,223
April	390,700	724,226	33,651	69,360	9,655
March	137,184	294,889	13,382	20,315	6,959
February	207,839	399,576	28,969	24,903	5,410
January	192,064	273,595	21,959	22,121	4,803
December	239,379	284,597	9,553	28,261	2,760
November	255,311	298,797	8,094	6,883	2,015
October	157,655	80,252	4,816	2,268	336
September	180,140	43,231	1,791	10	894
August	225,580		17,643		
July	212,220		14,178		

1/ For monthly data prior to 1979, see the Annual Report of the Division of Family Services. (Data rounded to nearest dollar and subject to adjustment.)

Division of Family Services, by Type of Service and by Month, July 1979-June 1980 1/

Inpatient Hospital	Outpatient Hospital	Dental Services	X-ray and Laboratory	Ambulance Services	Home Health Care
80,012,932	13,109,466	10,409,864	588,850	456,555	740,501
7,986,581	1,054,315	1,015,710	84,288	44,182	76,601
7,217,443	1,336,364	1,132,670	90,547	59,894	83,486
8,278,779	1,313,413	1,060,832	104,155	70,693	78,958
9,146,510	1,776,490	1,083,323	44,197	38,513	40,964
7,703,714	1,498,965	640,109	46,974	34,421	80,372
5,361,067	1,202,934	848,442	41,057	35,495	54,026
5,932,929	934,571	843,446	40,823	33,200	67,695
3,938,057	736,698	860,019	40,635	33,099	49,132
5,730,328	539,342	539,768	21,122	20,619	48,999
5,897,599	814,398	613,490	23,673	27,877	56,354
6,673,916	600,833	952,566	23,508	28,058	58,340
6,146,009	1,301,143	819,489	27,871	30,504	45,574

Division of Family Services, by Type of Service and by Month, July 1979-June 1980 (Contd)

Rehabilitation Center	Family Planning	Sterili-zation	EPSDT	ICF-MR	Mental Hospital	Buy In
13,704	744,192	215,551	637,539	26,475,788	1,236,956	6,472,000
2,800	89,947	7,298	59,479	10,390,570		536,478
9,741	126,104	13,504	60,531	9,870,925	135-	513,229
593	82,163	6,057	64,080	2,284,037		573,387
52	37,410	9,964	24,551			506,802
90	33,184	21,418	46,680		725	514,689
76	25,699	18,256	58,102		1,085	517,402
285	39,274	21,479	74,300		6,510	535,546
59	50,066	10,724	75,071	145	1,214	542,525
8	38,915	8,461	44,022	2,186	54,778	562,964
	64,063	37,164	74,744	2,272,144	578,127	556,754
	80,551	44,741	17,860	172,562	60,353	551,711
	76,816	16,485	38,119	1,483,219	534,299	560,513

Table VII. Average Monthly Number of Households and Persons and

County	Households	Persons	Value of Stamps
STATE TOTAL	112,148	314,383	$131,460,881
Adair	426	1,043	410,844
Andrew	146	444	171,996
Atchison	109	268	96,325
Audrain	358	932	354,478
Barry	576	1,553	580,166
Barton	159	404	143,732
Bates	345	851	320,490
Benton	284	746	299,826
Bollinger	335	975	383,464
Boone	1,062	2,723	1,227,716
Buchanan	2,219	6,160	2,595,420
Butler	2,097	5,519	2,139,358
Caldwell	138	311	114,446
Callaway	340	971	386,459
Camden	381	1,070	433,948
Cape Girardeau	786	2,019	827,882
Carroll	264	761	278,245
Carter	317	887	339,779
Cass	388	1,094	454,952
Cedar	320	796	309,869
Chariton	222	533	182,162
Christian	440	1,244	505,850
Clark	150	390	161,431
Clay	881	2,246	989,038
Clinton	177	425	152,126
Cole	712	1,762	758,890
Cooper	207	564	196,559
Crawford	534	1,491	604,608
Dade	145	371	142,226
Dallas	389	1,015	378,494
Daviess	162	411	154,690
DeKalb	90	252	93,704
Dent	537	1,421	582,941
Douglas	475	1,253	484,320
Dunklin	2,577	6,930	2,569,226
Franklin	770	2,232	934,878
Gasconade	150	392	140,735
Gentry	89	208	69,219
Greene	4,206	10,991	4,763,122
Grundy	223	554	206,681
Harrison	271	651	246,848
Henry	378	993	373,987
Hickory	232	579	224,674
Holt	119	294	104,779
Howard	306	764	283,317
Howell	790	2,015	775,347
Iron	363	1,109	430,869
Jackson	12,098	34,754	15,584,098
Jasper	1,978	5,031	2,002,988
Jefferson	1,639	4,974	2,173,968
Johnson	390	1,134	447,295
Knox	68	148	52,630
Laclede	632	1,800	720,142
Lafayette	309	869	370,667
Lawrence	586	1,645	627,134
Lewis	175	457	174,814
Lincoln	266	718	278,228

Total Dollar Value of Stamps for Food Stamp Program, by County, July 1979-June 1980

County	Households	Persons	Value of Stamps
Linn	319	771	266,892
Livingston	325	841	320,969
McDonald	430	1,251	509,066
Macon	249	611	233,085
Madison	299	801	321,184
Maries	166	426	138,742
Marion	646	1,725	700,330
Mercer	81	187	68,595
Miller	565	1,568	590,743
Mississippi	1,293	3,941	1,421,048
Moniteau	184	471	177,294
Monroe	156	412	145,363
Montgomery	247	705	281,987
Morgan	305	789	311,159
New Madrid	1,667	5,120	1,872,989
Newton	756	2,000	774,399
Nodaway	266	673	244,609
Oregon	526	1,398	546,310
Osage	166	423	149,601
Ozark	391	957	362,586
Pemiscot	2,322	7,263	2,680,742
Perry	254	655	249,275
Pettis	953	2,409	902,689
Phelps	572	1,612	664,779
Pike	414	1,206	499,447
Platte	315	913	416,385
Polk	355	868	332,196
Pulaski	677	2,085	837,311
Putnam	75	186	70,211
Ralls	130	314	117,426
Randolph	487	1,313	536,407
Ray	210	529	219,723
Reynolds	278	693	249,014
Ripley	751	2,248	892,919
St. Charles	1,179	3,433	1,545,059
St. Clair	311	833	311,098
St. Francois	1,213	3,564	1,506,548
Ste. Genevieve	214	678	270,877
St. Louis	9,402	26,589	11,872,217
St. Louis City	29,459	85,649	37,855,980
Saline	457	1,192	450,591
Schuyler	97	262	101,159
Scotland	74	180	67,602
Scott	1,578	4,599	1,759,561
Shannon	358	1,055	397,850
Shelby	176	435	155,028
Stoddard	1,297	3,401	1,245,728
Stone	343	926	369,735
Sullivan	160	384	132,539
Taney	431	1,111	430,207
Texas	485	1,371	523,983
Vernon	513	1,280	475,999
Warren	175	513	229,437
Washington	978	3,094	1,249,537
Wayne	561	1,567	584,389
Webster	443	1,103	406,723
Worth	65	184	63,864
Wright	563	1,469	537,615